

4-2014

# Half In Shadow She Speaks: An Expressive Therapies Exploration of The Self Image of African American Women

Lillian Marie Sylvester  
*Lesley University*

Follow this and additional works at: [https://digitalcommons.lesley.edu/expressive\\_dissertations](https://digitalcommons.lesley.edu/expressive_dissertations)



Part of the [Social and Behavioral Sciences Commons](#)

---

## Recommended Citation

Sylvester, Lillian Marie, "Half In Shadow She Speaks: An Expressive Therapies Exploration of The Self Image of African American Women" (2014). *Expressive Therapies Dissertations*. 62.  
[https://digitalcommons.lesley.edu/expressive\\_dissertations/62](https://digitalcommons.lesley.edu/expressive_dissertations/62)

This Dissertation is brought to you for free and open access by the Graduate School of Arts and Social Sciences (GSASS) at DigitalCommons@Lesley. It has been accepted for inclusion in Expressive Therapies Dissertations by an authorized administrator of DigitalCommons@Lesley. For more information, please contact [digitalcommons@lesley.edu](mailto:digitalcommons@lesley.edu).

HALF IN SHADOW SHE SPEAKS:  
AN EXPRESSIVE THERAPIES EXPLORATION OF THE  
SELF IMAGE OF AFRICAN AMERICAN WOMEN

A DISSERTATION  
(submitted by)

LILLIAN MARIE SYLVESTER

In partial fulfillment of the requirements  
For the degree of  
Doctor of Philosophy

LESLEY UNIVERSITY  
April 2014



### STATEMENT BY AUTHOR

This dissertation has been submitted in partial fulfillment of requirements for an advanced degree at Lesley University and is deposited in the University Library to be made available to borrowers under rules of the Library.

Brief quotations from this dissertation are allowed without special permission, provided that accurate acknowledgment of sources is made. Requests for permission for extended quotation from or reproduction of this manuscript in whole or in part may be granted by the head of the major department or the Dean of the Graduate College when in his or her judgment the proposed use of the material is in the interest of scholarship. In other instances, however, permission must be obtained from the author.

SIGNED: \_\_\_\_\_  
Lillian M. Sylvester

## ACKNOWLEDGMENTS

Although much on these pages was birthed in solitude, the doctoral journey was not a road I traveled alone. My Lesley University family, including my colleagues in Cohort 3, professors, administrative staff as well as my Expressive Therapies Doctoral Committee provided guidance and support, frequently pulling me back from the ledge. Constance Vratos and countless other library staff offered patient, helpful suggestions. Thank you all.

Dr. Deforia Lane provided probing questions and gentle, insightful support. My drama therapy mentor, Nancy Sondag, helped me to focus, pouring out words of encouragement in times of vulnerability and doubt. Thank you both.

The women who volunteered their time, energy and openness to the pilot and the current study—thank you for playing in the shadows with me.

Thank you to Tamica Liddell-Marquis, Dr. Angelique Simpson-Marcus, and Willistine Page for sponsoring workshops and providing space for same. To my former professor, Dr. Rosemarie Downer and my sister, Yvette S. Bishop, LCPC, for carefully reviewing and critiquing my efforts, thank you.

I am grateful to my aunt, Norma Faye Legette, for her guidance in the creation and construction of the textile portion of this study; and to my mother, LaReine A. Miller, for her recruiting efforts and unwavering, ferocious support.

Finally, to Dempsè, Alana, and Laila Sylvester: thank you for bearing with your Mommy as I prayed, played and stretched through the shadows.



## DEDICATION

I dedicate this work to the Black women who supported me in spirit when they could not do so in person, and to my husband, Richard Joseph Sylvester, Jr., who wiped my tears, bought me wine, chocolate and printer ink, and believed when the goal felt beyond me.

## TABLE OF CONTENTS

LIST OF TABLES	7
LIST OF FIGURES	8
ABSTRACT	9
Chapter 1. INTRODUCTION	10
Chapter 2. LITERATURE REVIEW	17
Stereotypes	17
Mental Health	34
Coping	45
Drama Therapy & Portraiture	56
Chapter 3. METHOD	62
Chapter 4. RESULTS	70
Dialoguing with Images	70
Mask Descriptions	72
Explore & Define Images	77
Naming the Self	83
Colorism	85
Codes Defined & Explained	88
Research, Witness, Respond	104
Researcher's Dialogue with Images	111
Journaling	113
Chapter 5. DISCUSSION	117



Limitations	124
Conclusion	127
APPENDIX: Adinkra Symbols	132
REFERENCES	135

## LIST OF TABLES

Table 1, Historical and Contemporary Stereotypes of Womanhood	23
Table 2, Allostasis (preparation/protection) and Allostatic Overload (damage)	37
Table 3, Barriers to Assistance as Identified by Nicolaidis and Colleagues	53
Table 4, Focus Group Recruitment and Attendance	63
Table 5, Guided Dialogue with Mask, Item A	72
Table 6, Initial and Consolidated Codes	87

## LIST OF FIGURES

Figure 1, Sculpting Exercise, Ohio Group (#1)	65
Figure 2, Sculpting Exercise, Largo Group	66
Figure 3, Sculpting Exercise, Ohio group (#2)	66
Figure 4, Sculpting Exercise, St. Paul Group	67
Figure 5, Ohio Focus Group Masks	71
Figure 6, Largo High School Focus Group Masks	73
Figure 7, St. Paul Senior Center Focus Group Masks	75
Figure 8, Wearing the Cloak	105
Figure 9, Adinkra Patches	107
Figure 10, Researcher Artifacts, Masks from First and Final Workshops	108
Figure 11, Reverse of Final Workshop Mask	109
Figure 12, Reverse of First Workshop mask	110
Figure 13, Cloak with Patches	114
Figure 14, Cloak to Prayer Shawl	115

## ABSTRACT

African American women have suffered from negative images being thrust upon them, unrealistic expectations desired from them, and a lack of acknowledgement of their humanity—femininity often ignored or manipulated for sexual or reproductive control over them. The scars from these societal ills have fueled mindsets which assist in the fostering of continued unrealistic goals (Western ideals of beauty, infinite emotional resources), allowing circumstances for illness and disease to persist. The study attempts to explore, through mask making and dramatic play, how African American women see themselves and how this view may be useful in creating interventions to treat this population. Issues including the negative effects of stereotypes, the hurtfulness of colorism, mistrust of scientific research and helping professions (medical and psychological) as well as the desire to commune with other Black women were expressed and explored. The word “Black” as used by the writer is interchangeable with the term “African American” and will be capitalized. The same is true in regards to “White” when used to describe individuals of European descent. Both terms appear in lower case when part of a direct quotation.

*Keywords:* African American women, Black women, coping, stereotypes, Superwoman, colorism, mental health, coping mechanisms.



## CHAPTER 1

### Introduction

#### SELF-IMAGE AND THE AFRICAN AMERICAN WOMAN

Thirteen years tall, I stood in the living room doorway. My clothes were wet. My hair was mangled. I was in tears, in shock, in need of my mother's warm arms. Slowly, she looked me up and down, stood up from the couch and walked towards me, her body clenched in criticism. Putting her hands on her hips and planting herself, her shadow falling over my face, she asked in a voice of barely suppressed rage, "What happened?" I flinched as if struck by the unexpected anger and answered, "They put my head in the toilet. They say I can't swim with them." "They" were eight white girls at my high school. I reached out to hold her, but she roughly brushed my hands aside and said, "Like hell! Get your coat. Let's go."

My mother taught me two powerful and enduring lessons that day. She taught me that I would have to fight back against racial and sexual injustice. Striding down Greenfield Avenue and across the Southfield Expressway with me crying and following behind, terrified of how she was going to embarrass me even more, she taught me that my feelings did not matter, that no matter how hurt I was, how ashamed or how surprised I was, I had to fight back because if I did not, then I would always be somebody's victim. She also taught me a lesson I did not want to learn: She taught me exactly when my private pain had to become a

public event that must be dealt with in a public manner. That day my mother offered me no personal comfort for my momentary shame and embarrassment; instead, she made me see my pain as not mine. Though she spoke no words directly, she made me realize instinctively that my experience was not some expression of tenth grade girls' jealousy—not a silly, private, adolescent version of “They don't like me.” My experience, she taught me, was directly related to facts I could not control—my blackness and my womanness. This was her lesson.

I did not know then that my childhood had ended and my initiation to black womanhood had begun. Neither did I know that I had experienced my mother's habit of surviving. I just knew that standing up for myself was what I had to do because it was the way black women had to be. We had to stand up in public for what was right, and stand against what was wrong. That was our role and our achievement. It was as Lena Horne had said in an interview: “If anyone should ask a black woman in America what has been her greatest achievement, the honest answer would be “I survived” (Scott, 1991, pp. 1-2).

Black women learn early that their personal pain is not as important as the family's/community's survival and that any semblance of weakness is unacceptable and will not be tolerated. What happens in the home stays in the home and White people are to be trusted “but so far.” These barriers prove formidable adversaries when help is needed, sought and attempted by African American women, making self-care—whether medical or psychological—viewed as an expression of pampering rather than necessity.

The history of the United States of America acknowledges the contributions of women grudgingly, and the experiences of African American women as an afterthought (Hull & Smith, 1982). Survival of African American families, held together by African American women, may be attributed to the conditioned response to “take it” and “keep it moving,” perceived by many as unyielding strength, sometimes arrogance, other times as anger. It has been said that Plato relegated women to hold one of three positions—and only one of the three—in civilized society: that of whore, mistress or wife (Giddings, 1984). For Black women in America’s early years, the label of property made these roles irrelevant, as the term “role” infers a choice. From a people who traveled here before Columbus (VanSertima, 1976), to those who arrived in chains providing the slave labor that built this nation, the struggle of African American women has often been examined as a footnote to the history of Black people; the collective struggle being more important than that of gender.

Although African American women fought against slavery and the wretchedness it perpetuated, derogatory images rooted in this history persist to this day, as do the scars they inflicted. In order to survive, Black women developed coping strategies which conditioned them to respond to oppression with a façade of strength and composure often not truly experienced by the individual. “Eventually, habits cease to be mere responses. They acquire the status of cultural prescriptions. In fact, they harden into ingrained attitudes—routines of thought, feeling and action—that overtime become unexamined and unquestioned traditions” (Scott, 1991, p. 8). With the prejudices suffered due to being Black and female, any perception of weakness was feared due to the exploitation of African Americans which was usually focused on the objectification and subjugation of Black women.



After the colonies had been established and slavery firmly entrenched in the new republic, the place of Black women in eighteenth century America was firmly set.

...by the early eighteenth century an incredible social, legal and racial structure was in place.

Women were firmly stratified in the roles Plato envisioned. Blacks were chattel, White men could impregnate a Black woman with impunity, and she alone could give birth to a slave. Blacks constituted a permanent labor force and metaphor that were perpetuated through the Black woman's womb. And all of this was done within the context of the Church, operating laws of capitalism, and the psychological needs of White males.

Subsequent history would be a variation on the same theme (Giddings, 1984, p. 39).

For Black women, being property secured their status as subhuman savages to be "put to ground," used to breed more hands for the labor force, and should she claim her children were from her master, doomed to two additional years of servitude had she the fortune of being indentured rather than born a slave (Giddings, 1984). However, gender was not the only tool used to control them. Higher economic value was placed on lighter-skinned Blacks, which often afforded them greater opportunities and access to resources (Wilder, 2010). Lighter-skinned Blacks "...were considered smarter and superior to dark-skinned blacks and thus realized more advantages in a white-dominated society—including broadened opportunities in education, manumission from slavery and the acquisition of land and property" (Wilder, 2010, p. 186). The "one drop rule" (Omi & Winant, 1994), the legal mandate of hypo-descent which said even the smallest amount of African blood (one drop) legally defined an individual as Black, and made the temptation to "pass for white" a consideration for mulatto, quadroon, and octaroon women. The practice of "passing" was difficult to navigate as it required one to ignore a part of

themselves, exposing them to the disdain of darker skinned people if suspected and to the rage of White retaliation if discovered.

Initially viewed as less valuable than male slaves, slave laws rendered children born to Black women slaves at birth, as they took on the legal status of their mother. This allowed slave masters to increase their holdings with their own seed—whether from their bodies or from other male slaves. The plight of the female slave was often ignored by the White wife, who suffered from a different kind of oppression, as she was expected to remain quarantined in the home and defer all decisions to her husband (Giddings, 1984; Jordan-Zachery, 1997). Not male, not White, the Black woman's plight was cross hatched with multiple intersections of oppression "...such that neither gender or race has independent centrality" in their lives (Thomas, 2004, p. 287). However, gender would often be the targeted issue as her sex made Black women vulnerable to the abuse for which she would also be blamed.

Black women were held accountable not only for their own subjugation, but for that of the entire race. Labeled "morally obtuse" and "openly licentious" (Giddings, 1984, p. 31) by White society in order to fuel the notion that Blacks *needed* to be lorded over, Black women were blamed for rape. White men alleged that as a result of the promiscuous nature of Black women, Black men were expected to be brutes, making assaults on any woman—Black or White—the Black woman's fault (Collins, 2000; Giddings, 1984). Black men could not help themselves, which made things more dangerous for pure White womanhood and for the mistreatment of Black children, especially daughters. The presumption being that as Black women had no virtue they could not impart it (Ladson-Billings, 2009). This relegated womanhood, specifically femininity, solely to those who were White (Giddings, 1984;

Jordan-Zachery, 2009). Black women, by necessity, hardened themselves: "...strength appears to be a culturally generated measure for protecting Black women against a life structured against them" (Beauboeuf-Lafontant, 2009, p. 25).

Anger—an emotion honored in men, but considered unfeminine—is viewed as strength in the African American female, and one must be strong in order to survive. A notion that bodes ill for any woman's mental health: attributes associated with strength render you "less than a woman" and situations which require you to ignore or push down your feelings do not make them go away, but allows them to fester.

After the abolishment of slavery, Black Codes (laws created after the Civil War which restricted the freedom of mobility—financial and otherwise—of Black people) limited labor opportunities for Black women to those of domestics (maids or washerwomen). Those who worked inside the Big House often held the diurnal position of insider/other (Walker, 1983). Working inside White homes, Black women were privy to the struggles of their White counterparts, and learned that Miss Daisy had her own set of shackles (Lorde, 1984). The insider/other position is a recurring theme in the study of African American women in the United States, from slavery to suffrage to same sex marriage, because "At any given moment, gender will reflect the material interests of those who have power and those who do not" (Brittan, 1999, pp. 113-114).

Not unlike the differences in needs and concerns identified during the Suffrage Movement when the plight of women was separated by race—issues of particular importance to Black women were ignored so that the agenda put forth by White women leaders of the

movement would be “taken more seriously” (Giddings, 1984)—the feminist movement of the 20<sup>th</sup> century has also been dissected among racial and cultural lines. The term feminist has not been wholeheartedly embraced by Black women; considered incomplete or not focused on issues of concern to them. Alice Walker (1983) who coined the term “womanist” did so in response to what was viewed as lacking in the term feminist. A womanist view is “committed to the wholeness of an entire people, male and female” (Walker, 1983, p. xi), seeming to pay attention to the many roles and responsibilities of each rather than placing a laser beam focus on women alone. Considered an Afrocentric worldview due to its placement of African American history, culture, and heritage at the center of the life experiences of African American women (Cannon, 1995; Collins, 2000; Walker, 1983), these themes must be addressed in any attempt to understand or serve the needs of this population.

As the survival of the Black family was a responsibility laid squarely on the Black woman’s shoulders, the perception of unwavering strength was viewed as the hallmark of her worth. Seen as female only in relation to sexual exploitation, her ability to support and protect her family was hailed within and outside of the Black community. Women like Ida B. Wells and Mary Church Terrell worked tirelessly to combat these bastardized fabrications and the laws they spawned (Giddings, 1984); however, these images and the mindset they created, within and outside of the Black community, did not disappear—they mutated (Collins, 2000; Jewell, 1993; Jordan-Zachery, 2009; Walker, 1983)

## CHAPTER 2

### LITERATURE REVIEW

The study of the self-image of African American women cannot be viewed in a vacuum. Historians and more contemporary scholars, researchers and journalists have presented examples of Black womanhood which reveal obstacles to the development of a healthy self-image and may directly affect help-seeking behaviors. Negative stereotypes and popular (however unflattering) depictions of “real” Black women in reality television represent current examples of old, controlling images. Manifestation of physical and mental disease is often ignored as a direct result of the maladaptive (or at least ineffective) coping skills applied to deal with daily, compounding stressors, and the masking of illness costs women dearly. When gender identity and role expectation are not examined, the failure to acknowledge the resulting damage of discarding these pieces of the Black female experience magnify the existing discomfort. These concerns are explored in this chapter, which ends with consideration for arts based research and the development of the current study.

#### **Stereotypes**

While the images used to portray African American women can change at different historical periods, there has been some consistency in terms of their general inferences and the stories that they are used to tell...two elements run throughout the various symbolic depictions of black womanhood—these are morality and sexuality. It is these two

elements that allow much of the discourse to be raced and gendered (Jordan-Zachery, 2009, p. 37).

Black women in the 21<sup>st</sup> century continue to struggle with caricatures of their image. Expected to embrace society's hegemonic notion of femininity which requires that "...women individually and collectively support men's dominant place in society by being emotional, caring and most of all, physically attractive" (Chaney, 2011, p. 516), Black women are expected to balance society's expectations as well as the cultural mores of the Black community, while keeping their hair and nails done (Sylvester, 2011).

...the "Mammy" stereotype of African American women, when internalized by them and by male African Americans, contributes to the perception of African American women as infinite resources for others, always strong in the face of adversity and having no need for care taking themselves (Thompson, 2000, p. 239).

Internalized oppression has been defined as "the incorporation and acceptance by individuals within an oppressed group of the prejudices against them within the dominant society" (Pheterson, 1986). This can manifest in several ways:

1. Fault finding: criticizing and invalidating each other, particularly in group settings (Mayo, 2009);
2. Unrealistic expectations of leaders and each other, resulting in lack of leadership, ineffective leadership, and the lack of desire to lead for fear of criticism (Pheterson, 1986);

3. Mistrust, isolation and withdrawal from other African Americans out of fear, resulting in shame for feeling afraid (Pheterson, 1986);
4. Narrow and rigid definitions of “Blackness” and attacking those who do not fit the mold due to speech (talking “White”) or interests (classical music vs R&B or hip-hop) (C. Jones & Shorter-Gooden, 2003); and
5. “Tolerating, proliferating and internalizing other oppressions, such as classism, sexism, adultism, anti-Semitism, and homophobia” (Gainor, 1992, p. 236).

This psychological sabotage aids in the prolonging or increase of depressive symptoms, intensifying the power of the already abundant and culturally specific risk factors for this population.

The image of Black women as self-sacrificing caregivers was embraced and perpetuated from within the culture. The expectation that the family and community would be supported, nurtured, and propelled to greatness on the backs of Black women became an excuse for Black men to subjugate them. Stokely Carmichael’s quip that the place of the woman in the Black Power Movement was “prone,”<sup>1</sup> i.e. on their backs under the Black man, and the perception that Black women’s feelings or needs are secondary to the Black man’s (Wallace, 1982) is mirrored in the rap lyrics and videos of today, where women—usually lighter skinned with long hair—are objectified. Black men have also suffered the indignity of being stereotyped.

---

<sup>1</sup> The Student Nonviolent Coordinating Committee (SNCC) attracted hundreds of idealistic young male and female activists, both black and white. Yet for all of the movement's commitment to racial equality, it failed to practice gender equality. The young men who led SNCC retained conventional notions of male superiority. They expected the women in the organization to cook meals, take notes, and defer to the men. Once, when asked about the role of women volunteers in SNCC, Stokely Carmichael replied that the "only position for women in SNCC is prone." Two white female activists, Casey Hayden and Mary King, wrote memos in 1964 and 1965 detailing their frustrations at the failure of the civil rights movement to [recognize] issues related to women's concerns. They and others would eventually leave the civil rights crusade and helped organize the modern feminist movement.  
[http://www.wwnorton.com/college/history/archive/resources/documents/ch34\\_02.htm](http://www.wwnorton.com/college/history/archive/resources/documents/ch34_02.htm)

To show the links between stereotypes is to demonstrate how they operate ideologically and thus denaturalize them...the weak man/strong women stereotypes are linked to class stereotypes, such as the “authentic” Black working-class male versus the “sell-out” middle class Black man: both are “weak” according to the dominant ideology but in very different, and differently valued ways (Wyatt, 2008, p. 55).

The working class male was viewed as weak due to lack of or poor education and scarcity of employment opportunities; the “sell out” was perceived as having turned his back on his people to “get ahead.” These are more contemporary examples of Black male stereotypes. Historically, Whites demonized Black men as brutes, simpletons, and shiftless, lazy, niggers (DuBois, 1969; Hatch, 1991; Jewell, 1993).

During slavery, the image of Black men was constructed to create fear and to justify their bondage. Black men were portrayed as sexual predators, shiftless, irresponsible, violent and lazy. The Black Buck, or “Brute Negro” was the fearsome persona of the huge, sexually depraved male who was lurking in the bushes to ravage pure White women (Hatch, 1991). Ironically, this physically intimidating image of strength was simultaneously the slave owner’s choice for breeding stock (Jordan-Zachery, 2009) and his greatest fear due to the mythologized larger size of the Black man’s penis, and perception of potency or stamina (Schulman, 1974). The Buffoon or clown was the entertainer or simpleton. Usually called upon to play music, dance or otherwise entertain Whites, he was seen as the “Good ole Black Sambo” (Huggins, 1971; Turner, 1971). The shiftless, “lazy nigger” was slow moving, messing up (usually a deliberate act of sabotage) whatever work was given him, misinterpreted instructions and was often found doing nothing really well. The Noble Savage (Kovel, 1971; Riggs, 1986),



personified by wisdom and gentleness (Uncle Tom in Harriet Beecher Stowe's novel of the same title, or Uncle Ben on the rice container) was also a stereotype used on First Nation men (think Tanto in *The Lone Ranger*). Those Black men who did not fit the mold, and there were many, were lynched (Giddings, 1984). These images were mainstays in early American theater and it may be argued that they persist in contemporary portrayals of Black men in movies and/or television. The image of "gangstas" in music videos or "players" on reality television shows who objectify and manipulate women (Mayo, 2009): the Black Buck. The slow-witted, unintelligent comic relief character found in many Black sitcoms (Cole in *Martin*, Jeff in *The Fresh Prince of Bel Air*): the Buffoon. Whether these images continue to impact the self-image of Black men should be examined.

Gender stereotypes exert power by appearing to be "normal and natural" truths about men and women that explain current gender arrangements; what sustains them as "normal" is their decontextualization—their separation from the historical matrix in which they were fabricated and from the ideological matrix in which they function (Wyatt, 2008). Historical in the sense that the image has been perceived as fact for so long that it is no longer scrutinized, but expected, Mammy in her non-aggressive "good disposition" (Jordan-Zachery, 2009, p. 38) is sought and welcomed by mainstream culture. Black female stereotypes may be viewed as ideological in the sense that it is easier to deal with a two-dimensional depiction of a Black woman, rather than view her as a complex, complicated, multilayered individual. In other words, it is easier to see an Angry Black Woman and dismiss her, than to consider she is a woman facing multiple challenges with limited resources (emotional and financial) and under strain from which her knees, patience and resolve are buckling.

The irony of these persistent stereotypes about Black women is that they sometimes operate simultaneously in describing any one Black woman. Who and how to be as ‘women’ is more complex for Black women than any other women. However, it seems that the one thing that Black women cannot be are [sic] innocent victims. They do not engender sympathy or support in literature, art, film or social policy. Thus it is possible to call them ‘nappy headed hoes’<sup>2</sup> and expect them to be strippers (Ladson-Billings, 2009, p. 89).

The fact that a radio personality in the 21<sup>st</sup> century can characterize a group of African American women as “hoes” on air with no fear of repercussion supports the notion that such images are prevalent, the mindset from which they were spawned persists, and the results are as traumatic for contemporary Black women as it was for our foremothers. Table 1 explores the historical stereotype, its contemporary mutation, and the assigned traits and implications of how Black women may internalize these images.

---

<sup>2</sup> In 2007, Don Imus, a radio personality in New York, commented on air that the female, predominantly Black, Rutgers University basketball team were “...some rough...nappy headed hoes.” His producer replied, on air, that they were “...some hard core hoes” (Kosova, 2007). He lost his job but was quickly hired by another radio station, resulting in the double whammy of the Rutgers team being publicly humiliated twice.

Table 1

## Historical and Contemporary Stereotypes of Black Womanhood

Stereotype Historical/Contemporary	Traits	Internalization
Mammy/ "Good Girl"	Nurturing caregiver  Strong  Supportive Selfless	Self-sacrificing; supportive at her own expense Façade of strength while suffering
Tragic Mulatto	Multicultural, cannot exist fully in either the Black or White Community.  May "pass" for White to garner privilege.	The choice to exist exclusively in one culture, sacrificing the other.  Fanatical reverence for heritage manifested as hyper-vigilance for civil rights and acknowledgement of culture
Sapphire/Hood Rat	Arrogant Controlling  Loud, hostile, obnoxious Never satisfied Comical; not taken seriously	Difficulty expressing emotions Feels "heard" only when loud, aggressive, enraged
Jezebel/Hoochie Mama or Hoe (Whore)	Excuse used by Whites to justify sexual exploitation of enslaved women Seductive Manipulative Hyper-sexed, animalistic Uncontrolled sex drive	Promiscuous, loose morals  Sexually aggressive Lacking sexual restraint
Superwoman and/or Angry Black Woman (ABW)	Impervious to hardship  Capable of multi-tasking  Accomplishes all she sets out to do without help or assistance Curt, abrupt language; seemingly unfeeling except to express anger	Façade of strength  Difficulty admitting struggle or need for help Feels "weak" or "a failure" if not in control Embraces superwoman or ABW stereotype to keep from being compared to other stereotypes or seen as weak



3

The most enduring stereotype (and endearing to mainstream culture) is that of Mammy, made famous in *Gone With the Wind*—as well as the image of Aunt Jemima on the pancake mix box. Today, Mammy shows up in the expectation of martyrdom rooted in slavery. Black women are expected to give until they have nothing left, and then give more. Mammy protected and nurtured her White charges often at the expense of her own family (Giddings, 1984; Lerner, 1972). Contemporary examples of the expectation of Black women to be self-sacrificing may be found in the professional Black woman, usually educators or social service providers who try to “save” the children or agency she works for to her own detriment. This example was identified by Ladson-Billings (2009), who noted that the Mammy persona had merged with that of the

---

<sup>3</sup> Bossip.com

Tragic Mulatto stereotype, in this instance. Here the tragedy has to do with class rather than color, as the professionals were middle class.

Sapphire also has an updated form. The caricature made famous on *Amos and Andy* also surfaced in the 1970's thanks to shows like *Good Times* and the more contemporary *Martin* of the 1990's.



Characters like Wilona and Shenehneh<sup>5</sup> typify the quick-witted, wise-cracking, opinionated Black woman who is always looking for, but cannot seem to acquire or keep a man. More recent examples manifest not as fictional characters, but real women on “reality” television, where “Venomous exchanges among Black women are more than acceptable—they’re commodified and sold” (Mayo, 2009, p. 107). Bossy and domineering, Sapphire berates whatever man unlucky enough to be saddled with her to the point where the viewer sympathizes with him and does not hold him accountable for any mistreatment of her. On reality shows, the attitude is

<sup>4</sup> [www.ferris.edu/jimcrow/sapphire](http://www.ferris.edu/jimcrow/sapphire)

<sup>5</sup> Shenehneh (shuh NAY NAY) Jenkins was arguably Martin Lawrence’s homage to the practice of cross dressing used as a comedic device by male African American comedians (Flip Wilson, Eddie Murphy, Jamie Foxx). The image, however, remains a depiction of an established stereotype of African American women.

directed at other women in attempts to gain male attention or to establish herself as the “Queen Bee.”

Jezebel’s contemporary make up is that of the Hood Rat. Considered a gold digger, she is the Black woman who may live in the ghetto, but could also be middle class, who aspires to be rich and is not above using a man for his money—an image common in reality television and hip-hop videos.

The Superwoman persona, considered a “practiced defense strategy” (Settles, Pratt-Hyatt, & Buchanan, 2008), may be viewed as a hybrid of Mammy and Sapphire, with infinite strength and emotional resources, and be the 20<sup>th</sup> century’s response to negative images. Ironically, the positive notions immediately inferred from her name—the all-powerful selfless rescuer—only serve to re-enforce the lie. Joan Morgan (1999), self-proclaimed hip-hop feminist paints her experience with the Strong Black Woman (SBW) persona:

...the years of social conditioning that told me it was my destiny to live my life as

BLACKSUPERWOMAN Emeritus. That by the sole virtues of my race and gender I was supposed to be the consummate professional, handle any life crisis, be the dependable rock for every soul who needed me, and yes, require less from my lovers than they did from me because after all I was a STRONGBLACKWOMAN and they were just ENDANGEREDBLACK MEN (Morgan, 1999, p. 87).

Selfless caregiving, while wearing either an apron, cape or business suit, seems to be the essential component.

Interestingly, successful black women without partners or children do not seem to be bestowed the Superwoman title (emeritus), as professional success alone is not enough in itself to be deemed “super” (Beauboeuf-Lafontant, 2009). Also of note is the omission of interracial or same sex relationships in regards to stereotypes of Black women, which may be yet another example of what is expected of a “Real SBW”— as she must be heterosexual and involved exclusively with African American men. Alice Walker on criticism of her work perceived as commentary on her interracial relationship:

At black literature conferences it [her work] would be examined fleetingly, if at all, in light of this “traitorous” union, by critics who were themselves frequently interracially married and who, moreover, hung on every word from Richard Wright, Jean Toomer, Langston Hughes, James Baldwin, John A. Williams and LeRoi Jones (to name a few), all of whom were at some time in their lives interracially connected, either legally or in more casual ways. Clearly it was not interracialism itself that bothered the critics, but that I, a black woman, had dared to exercise the same prerogative as they. While it is fine for black men to embrace other black men, black women, white women and white men in intimate relationships, the black woman, to be accepted as *a black woman*, must prefer being alone to the risk of enjoying “the wrong choice” (Walker, 1983, p. 288).

Choice of partner seems to carry its own burdens associated with stereotypes, with skin color playing a prominent role.

T. Joel Wade (1996) studied 91 African American students and alumni from northeastern states (New York and Connecticut) to measure whether fairer-skinned Blacks rated “their

attractiveness and self-esteem higher than darker-skinned Blacks” (Wade, 1996, p. 363).

Participants were given three assessments which allowed them to self-identify for physical attractiveness (seven point scale of 1: *I am not* to 7: *I am very* physically attractive), rate their skin color (seven point scale of 1: *My skin is very fair* to 7: *My skin is very dark*) and a third which measured self-esteem. The author treated self-esteem as as self-attitude towards skin color and attractiveness. His results illustrated that while darker skinned males rated their attractiveness higher than lighter skinned males, female ratings did not differ; darker and lighter skinned women rated themselves equally attractive. Linkages between status and skin color have also been examined.

Other research also reports that sex differences are associated with skin color biases.

Fair-skinned females are considered more attractive and are preferred by dark-skinned males, and dark skinned males may augment perceivers’ opinions of themselves by marrying a fairer skinned female....[however], dark-skinned females cannot augment perceptions of themselves by marrying a fair-skinned male (Wade, 1996, p. 360).

The above study, based on previous research which examined the effect of color on the status of individuals, seems to mirror Walker’s experience as a “traitor.”

The strength, power and heroism perpetuated by the Superwoman persona are unattainable goals. Although scholars have in the very recent past started addressing these unrealistic expectations, they continue to be culturally accepted, expected and perpetrated in the Black community, often resulting in unstable, unhealthy relationships, mental and physical disease, and perpetuation of hazardous “habits of survival” (Scott, 1991) passed down to younger



generations. The stories we tell about our home lives and experiences inform our sense of self, but also assist in inflicting harmful, controlling images:

Controlling images impose external expectations on behavior and create internal expectations people use to evaluate their own performance...When black women resist one controlling image they activate another; for example, black women who do not act like mammies are seen as jezebels. Controlling images work together in such a way to make it impossible for black women to occupy an ‘ordinary’, namely unmarked, social position (Wilkins, 2012, p. 175).

When the roles African American women are called on to play are restricted to “...stereotypical characterizations they become reinscribed in the minds of the larger public and find their way into our perceptions and our actions” (Ladson-Billings, 2009, p. 94). You are either a workaholic, self-sacrificing caregiver (Mammy), a gold-digger hunting for a Sugar Daddy (Jezebel), or an angry Black woman who doesn’t know when to shut up (Sapphire). The role you reject is assumed by another (Wilkins, 2012) and another is assigned to you. You cannot just “be,” you must “be something”—the family/community and society demand it (Gibbs & Fuery, 1994). This suggests the Superwoman persona may have emerged in response to not just being one thing, but a hybrid “all of the above” depending upon the demands of role.

Characterized as emotionally resilient, physically indomitable, and infinitely

maternal...superwoman is endowed with those very qualities that preclude her exploitation. Because she is not simply woman or a human being but a “superwoman,”

she cannot be victimized and therefore does not suffer under her circumstances, no matter how extreme (Beauboeuf-Lafontant, 2009, p. 25).

Angela Black, Velma Murry, Carolyn Cutrona and Yi-fu Chen (Black, Murry, Cutrona, & Chen, 2009) examined the correlation of financial strain, multiple roles and the mental and physical health of 693 rural African American women. Noting that "...stressors may be directly associated with suboptimal mental health, while at the same time indirectly associated with compromised physical health through episodes of worry and distress" (Black et al., 2009, p. 3), the researchers investigated linkages between chronic financial strain and African American mothers' health and found they were directly associated. "Increased financial strain was directly associated with decreased implementation of effective coping, decreased engagement in role responsibilities, and compromised mental health that affected physical health" (Black et al., 2009, p. 10). Those more actively engaged in the school experiences of their children and social connections (in this study, church related activities seemed the focus of social interaction) fared better regarding wellness. Networking and the resulting expansion of one's support system increased feelings of self-worth and perceived control over one's life. However, as with any coping mechanism, lack of balance, i.e. over-extending oneself with social obligations, could have a reverse effect.

Self-image is attached to culturally defined standards of beauty, competence, and values (Kelch-Oliver & Ancis, 2011; Perez & Joiner, 2003). Multiple models of Black womanhood have been identified and explored (Copeland, 1977; C. Jones & Shorter-Gooden, 2003; Williams, 2009). Karia Kelch-Oliver (Morehouse School of Medicine) and Julie Ancis (Georgia State University) conducted a qualitative study involving sixteen African American

graduate students to explore Black women's body image (Kelch-Oliver & Ancis, 2011).

Responses suggest that while White women seem to focus on weight in regards to body image, Blacks focus on other attributes; both views based in standards specific to their respective cultures.

Participants felt that the media's depictions of Black women still reflected White standards of beauty (e.g., light skinned Black women and/or women with wavy, curly or long hair), or promoted extremes of being skinny or being overweight. Many participants felt that only a few stereotypically beautiful Black women were represented in media (e.g., Halle Barry, Beyoncé) and these women have curves, but media images of Black women were considered by participants to be reflective of White standards of beauty such as thinness, lighter skin complexions, and long hair. The participants felt they rarely met the prevailing standards of (White) beauty reflected in media. Furthermore, a few participants felt that the "everyday Black woman" who was between the two extremes of slender and overweight was not represented in media. In addition to the absence of Black women in the media, some participants felt that the facial features and physical characteristics of Black people (such as the butt and lips) were appreciated in other races, but not Black people (Kelch-Oliver & Ancis, 2011, p. 351).

In Black sitcoms of the 1970's, it was not uncommon to find the dark skinned, obese matriarch (Florida Evans on *Good Times*, Mabel Thomas on *What's Happening*), or the overbearing female figure (Aunt Esther on *Sanford & Son*); characters who were valued for their caregiving or truth telling, rather than beauty (Mammy). These were contrasted by the younger characters, usually of lighter skin and thinner profiles. Although the theme of the era was "Black

is Beautiful,” the hue still seemed to matter. More current Black life depicted in the media, from sitcoms to reality shows and on cable channels geared towards children, project images of fairer hued, long haired, usually slender Black women and girls.

Black women tend to vary greatly from the dominant cultural standards in terms of their skin color, hair texture, facial features, and body shape/size. Therefore, these other aspects of beauty and appearance (other than weight) may be more relevant for black women.

Although this did not seem as salient based on the focus group discussions, it does not diminish the importance of these issues in Black women’s self-evaluations (Kelch-Oliver & Ancis, 2011, p. 354).

The standard of what is expected of Black women in regards to beauty, caregiving roles, self-sacrifice, and strength were established by others. Although Botox has made full lips attainable for fairer hued women, this feature on darker skinned people continues to be ridiculed. Full hips and short hair have been reclaimed by African American stylists in many magazines, but popular culture crowns those African American women with European features—blonde hair, lighter colored skin—supreme beauties. Colorism, or the increased value placed on lighter skin and more European features within the Black community, is an on-going concern regarding the development of a positive image for young, Black girls. Despite the argued success of the Civil Rights Movement and the current economic status of many Blacks in America, these standards, imposed by another culture, still impact the self-image of Black women.

JeffriAnne Wilder (2010) conducted nine focus groups of 58 African American women in order to explore the effect of colorism on young women from a southern university in central

Florida. The participants were asked to self-identify their skin color with the following results: three women (5%) rated themselves as very light, fourteen (24%) light brown, twenty-five or 43% considered themselves medium complexioned, fourteen (24%) rated themselves as dark and two (4%) said they were very dark. The women were then asked to 1) "...discuss the many color names that they use or hear on a regular basis" and 2) "...define the personality traits and stereotypes associated with each skin tone category" (Wilder, 2010, p. 189). The forty terms listed, which ranged from "Coolie" and "Sexy Red" to "Jigaboo" and "Super Black" (p. 190), resulted in the author linking "...socially constructed ideas, expectations, emotions and beliefs pertaining to skin tone" (p.192). These "color notions" included:

1. Red girls get more attention,
2. Black girls are "ghetto," and
3. "I am not black, I am brown." (p. 192-198).

Lighter skinned women expressed expectations of deferential treatment or rage at being perceived as "stuck up." Darker skinned women reported being judged as inferior, expectations of a lack of intelligence and of being poor academic performers. Those women in the middle seemed the most comfortable in their skins, according to this study, noting awareness of the struggles with stereotypes of the other women, but feeling untouched by them. Rather than the two tiered, light versus dark comparison the researchers had expected, three groups (light—medium—dark) were revealed and seemed to carry their own set of experiences and prejudices. With participants' varied responses suggesting a "survival of the fittest" mentality, with hue translating "into varied levels of resources and opportunity," (p.199), Wilder contends that "...color names and color notions present within the black culture have not changed" (p.

201), but have also mutated into more covert and “casual name-calling, subtle comments, and carefully hidden stereotypes” (p. 203), suggesting that color and context matter.

“In the world of the slave mother, there was little room for compassion, because there was no room for weakness” (Giddings, 1984, p. 45). This lack of tolerance for even the semblance of weakness persists to this day, making help seeking an obstacle for many Black women. Compound this with the issue of sexual identity and mixed race unions and the expectation of strength becomes further skewed. To be Black and female was not seen as “woman” for the Suffrage Movement, while the term “feminist” is viewed as alien, not involving us (Wallace, 1982; Winkle-Wagner, 2008). To be Black and female and entangled with anyone other than a Black man makes you a traitor to your culture (Walker, 1983), regardless of the availability of viable candidates (C. Jones & Shorter-Gooden, 2003; Wallace, 1982). The multiple battles for embracing her *self* can put a Black woman in perpetual “warrior mode” (Scott, 1991), rendering old coping skills useless against present day stressors. Coping with stereotypical images—whether embraced or rejected—requires confronting issues of competence.

If we believe that Black women are overbearing, deceitful, lacking in moral values or incompetent, how likely are we to entrust them with teaching children...If we believe these ugly and hurtful things about Black women, how confident are we about their ability to raise children who can benefit from schooling (Ladson-Billings, 2009, p. 94).

The continued onslaught of slights hurled at the Black woman's image—the content of her character obscured by multiple, cross-connected lenses of racism, sexism, gender and class—wears her down physically and emotionally, creating room for disease.

## **Mental Health**

Many studies have noted the connection of racism and sexism to the psychological and physical health of African American women, identifying multiple layers of stressors which correlate with disease, including:

1. Disproportionate poverty, unemployment, and low educational attainment (A. C. Brown, Brody, & Stoneman, 2000)
2. Macro stressors involving intersections of racism and sexism (Black et al., 2009; Donovan, Galban, Grace, Bennett, & Felicie, 2013)
3. Poor health awareness (Black et al., 2009) and stigma of illness (C. Brown et al., 2010)
4. Ineffective communication with caregivers or lack of trust in health care providers (C. Brown et al., 2010; Nicolaidis et al., 2010).

Depression, as a stand-alone diagnosis or part of a cyclical illness, such as Bipolar Disorder, "...affects the whole body, including the cardiovascular, metabolic, and immune system, as well as the structure and function of the brain itself" (McEwen, 2004, p. 2).

Depression has been shown to affect African American women at a greater rate of illness than their white counterparts (Borum, 2012; Myers et al., 2002; Wu, Prosser, & Taylor, 2010); only Latina women seem to suffer greater symptoms due to lack of access to healthcare, lack of

access to childcare if healthcare is available, challenges with language and cultural expectations (Myers et al., 2002), but report emotional distress less frequently than Blacks or Whites. Recent studies have indicated that depression, specifically the physiological aspects of the disease (increased adrenocortical hormones released into the brain over prolonged periods) have a “cumulative impact on physical and mental health” (McEwen, 2004, p. 2). “Structural remodeling,” in areas of the brain adversely affected by allostatic overload resulting in psychiatric disorders is important “because the altered circuitry is likely to contribute to impaired cognitive function,” (McEwen, 2004, p.6). In other words, malfunctioning brains result in poor decision making which may lead to maladaptive behaviors and increase allostatic overload—a vicious cycle of dis-ease.

Homeostasis is balance, the “normal” functioning of an organism or system. Allostasis is the organic process required to maintain that balance. When an organism is preparing to endure a seasonal or circumstantial change (hibernation or gestation, for example), the body produces hormones to facilitate the process. Allostasis is a process intended to support an organism through a finite period, it is not fashioned to operate over extended time frames; it is not a state of being. Prolonged production of these hormones creates allostatic overload, resulting in increased threat of damage, injury or illness. Such damage may manifest as abdominal fat deposits and bone mineral loss, which may be reversible; however, some effects may have lasting consequences. Table 2, based on McEwen’s work (2004), illustrates how stress, or allostatic overload, affects various body systems.



Table 2

Allostasis (preparation/protection) and Allostatic Overload (damage)

Body System	Protection	Damage
Immune System	Enhanced movement of immune cells to defend against pathogen.	Suppressed immune function due to over-production of hormonal mediators. May result in more frequent illness—colds/flu, digestive difficulties, headaches, etc.
Cardiovascular System	Managed rise and fall in blood pressure to assist in waking and movement during the day.	Prolonged, elevated blood pressure resulting in arterial plaque buildup which combine with cholesterol and free radicals that clog and destroy artery walls. May result in hypertension (high blood pressure).
Metabolism	Glucocorticoids replenish energy reserves by converting protein and lipids to carbohydrates, regulating energy input and expenditure.	Prolonged glucocorticoid elevations result in “comfort food” cravings and impede insulin effectiveness. May result in diabetes or obesity.
Nervous system	Regulates physiological responses to daily events through circulating hormones.	Glands such as the amygdala and hippocampus become hyperactive, resulting in atrophied receptors that are less effective at hormone transmission. May result in persistent anxiety or depression.

All of the resulting illnesses listed above are common concerns in the African American community, with African American women experiencing more pervasive symptoms and higher incidents of illness than their White and Latina counterparts (Black et al., 2009). The CDC

reported that new cases of Type 1 and Type 2 diabetes between 2002-2006 were highest among Blacks than Whites and Latinos, with African Americans being second only to Native Americans ("Health, United States 2002-2006, Table 29,"); however, the table did not delineate gender.

Prolonged elevations of hormones can have a direct effect on mood and judgment.

For the brain, the secretion of stress hormones, adrenalin and cortisol, in response to an acutely threatening event promotes and improves memory for the situation so that the individual can stay out of trouble in the future; *yet, when stress is repeated over many weeks, some neurons atrophy and memory is impaired, whereas other neurons grow and fear is enhanced* [emphasis added]...Major depressive illness involves structural changes in areas of the brain that are involved in anxiety, memory, and decision-making, along with changes in the rest of the body as a result of long-term imbalances in hormonal and other regulatory systems" (McEwen, 2004, p. 4).

As hippocampal formation continues to produce neurons in adulthood (McEwen, 2004), protection of brain function is imperative to a good quality of life. Women who suffer chronic allostatic overload due to poverty, abuse, lack of a support system, illness—or more commonly some mixture of all of the above—are at greater risk of prolonged illness, and often more likely to not seek treatment. Many who fit this description are Black.

...low income Black women are vulnerable to a number of major social stressors in American society, placing them squarely at risk for the development of psychological problems. However, the effort to document the mental health status of these Black women is hampered by the limitations of the research results, which have often drawn from

methodologically flawed studies which failed to control for socioeconomic, gender, or racial differences within the samples (Gibbs & Fuery, 1994, p. 562).

Therapy requires objective listening, providing unconditional positive regard, confrontation, collaboration, and care. If the client cannot trust the provider to be able to access the thoughts, find the language for feelings for which words seem to fail, develop interventions that speak to the whole person (culture, gender, spiritual walk, socioeconomic status) and be specifically relevant to the individual, then it is folly.

In mental health, the treatment is tailored to the illness which is diagnosed by evaluating symptoms for frequency, duration and intensity. The Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5) (*Diagnostic and statistical manual of mental disorders: DSM-5*, 2013), includes changes to increase consideration for culture, a necessary adjustment in order to fully and accurately assess how symptoms affect specific individuals. Clinicians cannot separate *how* one became who she is (environment, gender, culture) in the treatment of what ails her. Being Black and female is not seen as a dichotomous situation (one topic viewed as separate and apart from the other): "...womanism flows from a diunital (both/and) worldview, rather than a dichotomous (either/or) worldview, in which seemingly opposite ways of being (black/female) can coexist harmoniously. One is not either black or female; one is both/and" (Borum, 2012, p. 318). When examining depression with a primary focus on gender, depression also takes on a diunital form (this *and* that):

Women's depression...can be viewed as one outcome of daily struggles by women to reconcile the cultural imperatives of the socially constructed "good woman" with their materiality

as embodied beings and the social circumstances of their lives...In the face of these dilemmas, when a woman's body is no longer able to keep up with the demands and practices of femininity, the body provides a temporary respite. Effectively, the body goes "on strike" and shuts down, and, as a result, the woman in the body can no longer fulfill the mandate of the "good woman" (Lafrance & Stoppard, 2007, p. 28).

For Black women, the issue is further complicated by culture, not just gender. Femininity of Black women has been dehumanized by American culture in order to justify slavery and the degradation suffered at the hands of White men. In a world where rights, suffering, and even illness are defined by terms developed by and normed on White men, there are often no words to accurately express the female experience, whatever her culture.

...this master narrative can act as a double-edged sword. While helpful in some instances, the medical narrative can, at the same time, individualize, decontextualize and depoliticize experiences. Understanding the experiences of depression or the trauma of rape, for example, as solely medical conditions, constructs women's suffering as individual pathology (McKenzie-Mohr & Lafrance, 2011, p. 50).

When the Founding Fathers were formally shaping this nation after having forcibly removed it from First Nation indigenous folk—the devastation of which continues to be visited upon their descendants through yet another example of invisible, silent female suffering (Fine, 2012)—their thoughts were centered on the desires of White land owners, not their spouses or chattel, bovine or otherwise. Despite this, and the discomfort that frequently accompanies

discussions on race, sex and class, these issues—specifically where the wellness of Black women is concerned—must be confronted and addressed.

...although it is still not unusual among white males on the left in the U.S. to think that to talk about “race” is automatically “racist;” to see or acknowledge color difference as “racist.”...Such feelings are vestiges of earlier stages of anti-racism. But what worries me is that such people don’t realize that they thus become instruments of the “invisibility” that Ralph Ellison described so well, although I don’t suppose he thought it was ideological. Not only do I see “invisibility” as a problem of ideology; I also see it as the final and most difficult to combat stage of racism and sexism. The fact that it involves conjunctions of capitalist exploitation and compulsory heterosexuality makes it even more difficult to diagnose. I suspect that such conjunctions cannot be resolved at all. Rather they must be unpacked, examined and disarmed (Wallace, 1990b, pp. xviii-xix).

In order to develop appropriate policies and treatment regarding women, women must be part of the conversation, as to ignore the “...study of certain segments of the population, such as Black women, results in missing bricks of foundational knowledge that yield a psychological base that is faulty, inadequate, and incomplete” (Thomas, 2004, p. 287). The current standard for mental health diagnosis, the DSM-5 uses the medical model of assessing disease in terms of the intensity, frequency and duration of symptoms. Intended for use by trained professionals, socioeconomic and cultural factors must be considered with symptomology or the diagnosis will be as “flat” as a mask. “...And we of the unacceptably strong...” (Giovanni, 1997), restrained by race and role, are heard only when we “modulate” our voices (Rogers, 1993) to fit cultural or

societal expectations. Historically, when Black women have had the audacity to speak out about injustices or unrealistic expectations set upon them, they, the victims, were often punished for it with accusations of falsehood or expected to prove their victimization. Alice Walker (1983) discusses:

Black women are called, in the folklore that so aptly identifies one's status in society "the *mule* of the world," because we have been handed the burdens that everyone else—*everyone* else—refused to carry. We have also been called "Matriarchs," "Superwomen," and "Mean and Evil Bitches." Not to mention "Castraters" and "Saphhire's Mama." When we have pleaded for understanding, our character has been distorted; when we asked for simple caring, we have been handed empty, inspirational appellations, then stuck in the farthest corner. When we asked for love, we have been given children. In short, even our plainer gifts, our labors of fidelity and love, have been knocked down our throats (p.237).

Suzanne McKenzie-Mohr and Michelle Lafrance (2011) examined narratives of women who self-identified as living well after sexual assault. The challenge for their participants, and arguably for women in treatment for trauma of any kind, is to learn how to "talk about their own sense of agency and effort in the process of recovery, without also invoking blame for having become depressed in the first place" (McKenzie-Mohr & Lafrance, 2011, p. 58) . The diunital connection of "both/and" is a delicate "tightrope" to walk. Accepting the position of agent, being able to act and patient, having been acted upon or receiving (whether care or trauma) is not an easy thing: "...this delicate balance can be determined when agency alone is emphasized by the listener. In such instances where this balance is not struck, there is the (however unintended)

effect of dismissing a woman's pain and the integrity of their character" (McKenzie-Mohr & LaFrance, 2011, p. 59).

Unreasonable expectations of strength from within and outside of the African American community affect whether and how Black women seek help. One hundred eighty-seven women, who self-identified as Black, were recruited from a southeastern university to explore whether perceived racial macroaggressions (PRMa) or perceived racial microaggressions (PRMi) would be 1) endorsed by the participants and if so, 2) could be indicators or predictors of anxious or depressive symptoms (Donovan et al., 2013). Perceived racial discrimination (PRD) was dissected into two parts: macroaggressions (being accused of something because of race) and microraggressions (being refused service or ignored, because of race), the latter focused on more covert, subtle incidents. Although the impact of gender on the relationship between PRD and mental health, as well as the difference in experiences of racism and sexism for Black women as opposed to Black men were not addressed, admitted limitations of the study, the research suggested persistent effects of racism on mood. Both micro- and macroaggressions were connected to depressive symptoms, however, only macroaggressions were correlated with increased anxious symptoms. The authors discuss the results:

Because macroaggressions are blatant, egregious acts, they may be more difficult to cope with than microaggressions, which are subtler and might be perceived as less offensive. Black women may also be desensitized to racial microaggressions, given their frequent occurrence, and may not react as significantly compared with more infrequent macroaggressions (Donovan et al., 2013, p. 193).

In other words, day to day racism and sexism is expected and adjusted to, but more blatant incidents result in a more intense reaction. Mistreatment is expected, and responses are tailored to the intensity of the event. Expectation is a main ingredient for developing a conditioned response.

Cultural events can “generate or contribute to abnormal behaviors” (Alarcon, Foulks, & Vakkur, 1998, p. xix). The shaping of personality, developing coping and response mechanisms, are affected by societal influences, and the most vulnerable populations are at the greatest risk (Fabrega, 1990; Guarnaccia, Canino, Rubio-Stipec, & Bravo, 1993). Although the aforementioned research does not focus on the African American community, it is not a great leap to consider how the lasting effects of racist notions, rooted in slavery and persistent to this day, have contributed to the distorted images of Black women.

The recurrent patterns of one’s preoccupations, memories, value judgments and attitudes, ambitions, and emotional responses are all facets of personality influenced by past and present cultural environments. One’s thoughts and behavior are continually being overtly and covertly shaped by culture. Culture is omnipresent and, like language, is both intentional and subconsciously automatic throughout life. Like language, culture is learned from early childhood, but elaborated and refined to subtler and more sophisticated levels by adulthood. To deny such influence is to deny that what is learned from one’s parents and throughout life has little influence on the nature of one’s being (Alarcon et al., 1998, p. xxi).



The grandmother who disowns her granddaughter for sleeping with a White man (Giddings, 1984), the woman who struggles to be what others expect her to be for sake of uplifting the race and protecting the Black man (Wallace, 1990a; Williams, 2009), swallowing your truth and teaching your daughters to do the same (Beauboeuf-Lafontant, 2009; Jack, 1999; Lerner, 1972; Rogers, 1993), and demanding your children—especially your daughters—be “more independent, assertive, and less conforming to ...sex-role stereotypes” (Gibbs & Fuery, 1994, p. 563) out of fear that others, especially Whites, men in general or agencies will use your pain and vulnerability against you (Beauboeuf-Lafontant, 2009; Nicolaidis et al., 2010; Power, Cole, & Fredrickson, 2011) are learned behaviors. Historical psychological conditioning of race status, gender roles, and the cultural expectations of both continue to influence the self-image of Black women.

## **Coping**

As a matter of survival, Blacks during slavery and the Jim Crow era learned to mask their true feelings and opinions. The Buffoon stereotype of the lazy, slow talking, incompetent Black person, was often used as a sly way to sabotage the White man’s wishes (Hatch, 1991; Huggins, 1971; Turner, 1971). Mammy’s mask, eyes wide, teeth glistening kept her true feelings deeply hidden (Hatch, 1991), her “ever-present grin and her size [suggesting] her contentment with her situation as a slave” (Jordan-Zachery, 2009, p. 38). Intelligence, sentiment, expressions of anything other than deference in servitude put the Black woman, and anyone she held dear, in danger—to be used, mistreated, sold or killed—in order to keep her “in her place” (Giddings, 1984).

We wear the mask that grins and lies,  
 It hides our cheeks and shades our eyes,—  
 This debt we pay to human guile;  
 With torn and bleeding hearts we smile,  
 And mouth with myriad subtleties.

Why should the world be over-wise,  
 In counting all our tears and sighs?  
 Nay, let them only see us, while  
 We wear the mask.

We smile, but, O great Christ, our cries  
 To thee from tortured souls arise.  
 We sing, but oh the clay is vile  
 Beneath our feet, and long the mile;  
 But let the world dream otherwise,  
 We wear the mask! (Dunbar, 1997, p. 17)

In regards to self-image, the problem intensified when the mask went from a “go to” accessory, to becoming cemented in place. The internalized oppression operates to further victimize Black women from within (Gainor, 1992).

White women share similar masks with different roles: The Good Woman, The Control Freak and The Victim (Lafrance & Stoppard, 2006). Girls learn young to “...see and hear in

double—to watch and listen to [themselves] in [their] own terms, while at the same time comparing this knowledge...with what is named ‘reality’” (Rogers, 1993, p. 289). None of these masks is a complete identity, but a one-sided, flat caricature of qualities considered desirable in the feminine.

... the “good woman” identity, while culturally revered, is also devalued and disadvantages women in relation to men. Resisting discourses of femininity by relinquishing “good woman” practices and attending to one’s own needs may be essential for a woman’s recovery from depression; such a move, however, is likely to threaten a woman’s identity (Lafrance & Stoppard, 2007, p. 31).

Black women get accustomed to ignoring or “masking” their feelings, whereas White women “...held to more flexible standards [have] the right to cry, a recognized prerogative to feel the way she feels” (Beauboeuf-Lafontant, 2009, p. 78). Caught between a rock and a hard place, women find themselves in the space between a cultural ideal and limitations of their own material resources (physical, financial, mental, and spiritual energy). To make matters worse, some have advised that women curtail activities outside of the home in order to better manage stress, negating female contributions of caregiving to that which occurs in the home and discounting the real need of additional income in many families.

The assumption that women should selflessly direct their energies towards caring for others remains taken for granted, and so is socially invalid as a legitimate source of women’s distress. Moreover, when therapists’ understanding of their clients is shaped by this perspective on women’s lives, women’s caregiving practices are unlikely to be

questioned. Instead, women may be advised to reduce their involvement in activities outside the home (e.g., switching from full-time to part-time employment or scaling back on educational goals) as a way to cope with stress...(Lafrance & Stoppard, 2007, p. 31)

Not only is this view misogynist—to presume that caregiving is the most important of all female roles and, conversely, that all females must aspire to be caregivers—it negates the financial need of those who are caregivers and the earning capacity of women, whether they are single parents or “sandwiched” between caring for children and elders.

The perception that Black women are strong and can “take it” so they should is not only unfair, but unrealistic. In *Willow Weep for Me* (1998), the author is shocked by a White woman’s off-handed remark about Black women and depression: “...when black women start going on Prozac, you know the whole world is falling apart” (Danquah, 1998, p.20). The expectation that Black women will be strong and accept any and everything thrown at them without complaint has resulted in unrealistic expectations held by society, their families and themselves. “We wear the mask that grins and lies...”, but unlike the poet’s discussion of masking the pain of racism, this mask is often used to lie to ourselves. Before we dismantle the mask, we must first honor how it was created, understand its purpose and evaluate its current value. The journey toward this new understanding is dangerously transgressive: “Transgressive courage involves going beyond the strictures [sic] of forbidden knowledge of relationships, including cultural conspiracies of silence that surround women’s knowledge” (Rogers, 1993, p. 275). This includes the mindset that denies the womanhood of Black lesbians.

Alice Walker discussed Muhammed Ali's comment, quoted from Ann Allen Shockley's *The Black Lesbian in American Literature*, that some professions "shouldn't be open to women...Lesbians, maybe, but not women" (Walker, 1983, p. 287). Cassius Clay had long given up his slave name to embrace Ali as a Muslim, a culture with religious tenants that require strict separation of the sexes in worship and gender roles. At that time in the Black community, gay and lesbian issues were not openly discussed. To this day, there are churches, neighborhoods, agencies and individuals who openly reject same sex relationships as deviant. Comedian Wanda Sykes joked in her 2009 HBO special about the intersections of race and sexuality:

Got married in California and had to publicly "come out." I had to do it...especially after that Prop 8 fiasco. I had to come out. I had to say something because I was so hurt...Prop 8 passed...now I'm a second class citizen. I'm lower, I dropped lower...'Cause as a Black woman I can do whatever, marry whoever, but as a *gay* Black woman, uh uh, even lower. I think about it and it's like, yeah it's harder being gay than it is being Black...There are some things I had to do as gay that I didn't have to do as Black. I didn't have to come out Black. I didn't have to sit my parents down and tell them about my Blackness. "Mom, Dad, I gotta tell y'all something. I hope you still love me. Mom, Dad, I'm Black" (Sykes, 2009).

Sykes' initial broaching of the subject of her marriage was met with an uneasy silence before her masterfully delivered punch line: "I didn't have to come out Black." Images of lesbians, Black or otherwise, are often judged by the Black community as being against God, or "trying to be men." Images of being less than human and unfeminine seem magnified by being lesbian,

making this a triply bound circumstance for Black women, further perpetuating harmful, controlling images.

Thus, pervasive and widely accepted controlling images of people of color, the poor, sexual minorities, and women depict these structurally disempowered groups as childlike, naturally evil, complacent with their subordination, or as having a corrupting influence on civil society. In the process, compulsory heterosexuality, male centeredness, economic privilege, and whiteness are legitimized as indisputably normative and socially necessary values and qualities (Beauboeuf-Lafontant, 2009, p. 22).

Past efforts to change this dynamic within mental health have focused on rights advocacy, rather than empowerment (Gibbs & Fuery, 1994), which further leaves the issue of lesbian acknowledgment to be questioned. The challenge being that empowerment places the responsibility and power to change in the hands of the consumer, whereas the “needs prevention” and “rights advocacy” approach treats African American women as victims to be led through a process instead of forging one. Other issues identified which impede efficacy of service delivery included feelings of isolation (fueled by the needs prevention model), multiple roles resulting in feeling over extended, and the missing component of faith based principles in treatment (Neal-Burnett et al., 2011).

For African American women, success is a double edged sword: an indicator of strength used as an excuse to expect them to perform and succeed despite the personal cost. And in the event this professional woman struggles with a mental illness, treatment may be fraught with

additional stigma of a perception of incompetence, as context of role and manifestation of illness is not always considered (Taylor, 1998).

Professional [Black] women are often psychological orphans. Their suffering is denied because their success is all that is acknowledged. Their success in the larger world has often come at the expense of rejection by the family and community with no real acceptance or inclusion in the world of the dominant culture that would be more consistent with their success (Thompson, 2000, p. 249).

Again, Walker's diurnal position of Black womanhood is evident, as the professional African American woman is at once hailed an example of excellence and "unacceptable strength" to be exploited by her people and society at large. This mindset does little to empower or acknowledge the real-world, everyday challenges associated with being a partner, parent, or professional woman. The authors suggest opportunities to dismantle the ideal "good woman" persona in prenatal parenting classes and community based services (depression groups, substance abuse treatment). Making the discussion an integral part of treatment could go far to communicate that self-care is not a luxury, but a necessity for women, and their roles as caregivers do not trump this need. Those who start to believe this mask of moral masochism, a phrase coined by Thompson (2000) to identify "a level of excessive personal sacrifice that assumes pathological proportions" (241), run the risk of physical and mental illness.

Illness, disease, and abusive situations are allowed to persist when victims remain silent. Many African American girls are taught that silence is not only expected, but to expose anything that puts the family at risk of being viewed in anything less than stellar light is an affront to

themselves, their family, community and ancestors. Young voices are taught to remain mute; better to be seen as angry rather than weak, permitting the cycle of pain and invisibility to continue (Thompson, 2000). Due to cultural perceptions of strength and a stigma for any semblance of weakness, Black women are vulnerable to resisting seeking help. In mental health, the issue of self-care is often met with disdain and excuses, viewed as a decadent luxury rather than a necessary part of a healthy life. Cheryl Thompson (2000) noted that her clients “found it extremely difficult to consider that their personal need was valid...not excessive” (248). Mistrust of the health care system and stigma of being viewed as “weak minded” give the mental health system a double dose of suspicion: “...African Americans are less likely than Whites to seek quality mental health care, accept recommendations to take antidepressants, or view counseling as an acceptable option” (Nicolaidis et al., 2010).

Nicolaidis, Timmons, Thomas, Waters, Wahab, Meja and Mitchell (2010) collaborated with Hispanic researchers to explore the influence of violence and race on depression care. Their research involved minority women in Portland, Oregon. As African Americans are such a small percentage of the population and the women in their study were targeted by recruiters, there was little variation in responses; an admitted limitation of the study as most of the “...study population [consisted] of low-income women who had lived very difficult lives” (Nicolaidis et al., 2010, p. 1474). The masking of the need for help was a noted barrier to seeking assistance women reported learning from their families; more examples of maladaptive, conditioned responses rooted in distrust of “the system.”



You know, that was our thing around our house that you're going to be all right, like we're Empire State Buildings. You know, while the other people are running around getting help, we're—it's oppressiveness inside (Nicolaidis et al., 2010, p. 1473).

Intimate partner violence (IPV) and its effect on depression and help-seeking behaviors were the focus of this study, which identified several themes as barriers to Black women seeking mental health care. Table 3, based on the work of Nicolaidis and colleagues (2010), outlines the emergent themes.

Table 3

## Barriers to Assistance as Identified by Nicolaidis and Colleagues

Themes related to the individual.	Themes related to the health care system.	Themes related to depression and depression care.
Violence, drug use, and depression are hard to separate.	Intergenerational messages to avoid health care.	Expectation to be a “strong Black woman” acts as a barrier.
Abuse “messes you up.”	Mistrust of health care system as a “White” system.	Negative attitudes towards antidepressants.
Violence victimization leads to perpetration.	Negative experiences with health care attributed to racism, rather than lack of training or professionalism.	Preference for self-care and counseling; Black, female counselors preferred, but in short supply (regional concern).

Although the study had significant limitations, the respondents provided insightful suggestions for modification and expansion of treatment options including: 1) requesting a mental health program that was staffed by and focused on African Americans, 2) valuing personal experience over credentials, allowing for testimonies by and mentoring from women who had “made it to the other side,” and 3) adding an arts based program that “addresses practical life issues” (Nicolaidis et al., 2010, p. 1473). It seems they were asking for more than a “talking cure,” seeking to explore alternatives in treatment, including an artistic expression of their discomfort and healing processes. The call for creative interventions was echoed in other studies (Mattis, 2000).

Not unlike initial diagnoses found in past versions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), the history of the Black female experience in the

United States is frequently an afterthought or reactionary focus of a given field of study. As with most minority groups, calling attention to the struggles and concerns of a population usually begins with acknowledging some sort of lack, gap, misrepresentation or underrepresentation in resources or issues. To tell the truth about our individual experiences as Black females is often to lay bare the complexities of family life for many low to middle income Black families—and this truth is not a universal experience, but as unique and distinctive as the individual telling the story (Gibbs & Fuery, 1994). Struggles with roles, interpersonal relationships, community and religious expectations are not topics for public discussion, but the needs of these arenas may “trump” one’s own, racial issues being viewed as more crucial to the Black community’s progress than those of gender: “...the education, social class and economic constraints experienced by a black woman’s people necessitates that black women create a modified version of womanhood that influences how African American women perceive and make sense of their roles” (Chaney, 2011, p. 519).

When one considers that a great percentage of families living under the poverty level are headed by African American women and that “...poor Black women [are] more likely to experience more frequent threatening and uncontrollable life events than the general population and, as single parents, more likely to suffer from chronic depressive symptoms and feelings of powerlessness in relation to their multiple social roles” (Gibbs & Fuery, 1994, p. 562), the bind gets tighter. Add the potential for sexual discrimination based on sexuality, not merely gender, and the knot quadruples; the issues intermingle and overlap. But to hide these expectations of strength or “acceptable” images of womanhood, to only mention them in the safety of the Black community does nothing for the understanding and dismantling of the beliefs and stereotypes

they perpetuate. Michele Wallace discusses her experience with writing the first release of *Black Macho*:

When I wrote *The Myth of the Superwoman*, I was warned by my agent and editor that it was extremely risky for me to tell the story of my confinement at seventeen in a juvenile home. Indeed, it would have been risky, or at least transgressive, if I had told the whole story of the family turbulence that led to my being placed there... Only in recent years have I begun to come to the defense of that little girl, to listen to her story instead of taking my mother's side against her. This is not so easy to do because, through fear, I had been learning for years to ignore and discount her" (Wallace, 1990b, p. xxxv).

"We" is more important than "me," leaving whatever fears, feelings or struggles to be considered within the context of my community (Rogers, 1993). The transgression of voicing confusion, resentment, pain or inconsistency spans generations of learned silencing and is a conditioned response. Siding with entrenched expectations (what happens in the home stays in the home, you do not criticize your parents' decisions) and hiding the scars inflicted by the silence are recurring themes in the excuses many Black women give regarding avoiding seeking help, particularly regarding mental illness.

In mental health treatment, race, culture, gender and socioeconomic status all combine to influence an individual's development and must be considered in relation to the manifestation of symptoms. Values and personality all have roots in these topics. As coping skills are learned behaviors, often rooted in an individual's values, *how* a person became who she is an important element of any strength based treatment plan.

## **Drama Therapy & Portraiture**

When spontaneity is at zero, the self is at zero. As spontaneity declines, the self shrinks. When spontaneity grows, the self expands. If the spontaneity potential is unlimited, the self potential is unlimited (Moreno, 1973, p. 8).

African Americans embrace art in many aspects of their lives. Traditional African cultures adorn ceremonial drums and cloth to indicate the importance and purpose of the item. For African Americans, the art on quilts and clothing often told the history of the family as these were handed down from generation to generation. Recipes, bibles, garments and tools once belonging to ancestors are treasured heirlooms. Family traditions such as Sunday dinners seem more difficult to keep up with in the current era of more, disposable, now, hurry. Families struggling with financial concerns, often facing the additional challenges of caring for elders or managing on a single income (or the need for multiple incomes which often means multiple jobs) struggle to balance finite resources of energy and time with their values. The luxury of self care, including honoring traditions and cultural rituals, may be sacrificed for more work hours or recreation apart from familial responsibilities. Tom Joyner, radio personality and host of *The Tom Joyner Morning Show*, touts the message of “Party with a Purpose.” Rather than trying to rally listeners around a political or social agenda alone, he uses his celebrity and connections to

create events which are simultaneously fun and educational, usually revolving around health issues (such as diabetes and hypertension, both prevalent concerns in the Black community) or voter registration. Doubling down on engaging people in much needed fun and community advocacy, Joyner is an example of addressing the community's concerns within the context of their experience.

Clinical application of addressing concerns within context would do well to include art and play with a purpose. Researchers who have studied the mental health of Black women have commented on the need for artistic interventions, rather than relying solely on a talking cure. The ability to explore other aspects of one self through means often abandoned after grade school, such as art and dramatic play, provide an arena for expression and connection that can deepen understanding and clarify concerns.

Jacob Levy Moreno (1889-1974) is hailed as the father of drama therapy. He developed two kinds: the type of clinical dramatic play that focuses on connection and collective, social components (sociodrama) and that which focuses on the individual's experience with the roles their lives dictate (psychodrama) (Sternberg & Garcia, 1989). Moreno defined role as "the actual and tangible forms which the self takes" (Moreno, 1972) and identified four specific types:

1. Psychosomatic or physiological roles, pertaining to the body.
2. Psychodramatic or fantasy roles pertaining to the imagination.
3. Social roles, based on actual relationships with others.

4. Cultural roles, developing in response to the demands of a particular environment (Landy, 2005, p. 94).

Psychosomatic roles involve actions of eater, sleeper, eliminator and mover. Fantasy roles include gods, angels, devils or things hoped for such as love, success or power. Social and cultural roles include those connected to others, such as family, friends, gender or work based interactions. According to Landy (2009), the reverse side of the initial role is the counterrole. Not a polar opposite, but what some art therapists would recognize as the shadow (McNiff, 1992) of the social role. “It is not the opposite of the role as evil is to good, but rather other sides of the role that may be denied or avoided or ignored in the ongoing attempt to discover effective ways to play a single role” (Landy, 2005, p. 97). Moreno’s original process has been further altered and extended by drama therapists such as Rene Emunah, to further explore the concerns of specific clients.

Renee Emunah (1994) explored the efficacy and purpose of the use of drama in clinical settings, identifying five goals for drama therapy in treatment: 1) the expression and containment of emotion, 2) the development of the “observing self,” 3) an expansion of role repertoire, 4) the expansion and modification of self-image, and 5) improved facilitation of social interaction and the development of interpersonal skills (Emunah, 1994). Drama’s ability to physically express emotion while providing distance from it is part of the actor’s arsenal of tools. In drama therapy, as the goal is to explore and examine the process rather than to perfect a product, the distance provides an aura of safety as “there is no real life consequence to the expression” of the emotion (p. 32). Containing the performance in a therapeutic setting allows the individual to master the manifestation of emotion. The observing self, or “the director within us” per Emunah, is

distanced enough from the expression to perceive what could be, allowing for exploration of alternative choices. The goal of role repertoire allows for the individual to play with different choices, allowing "...us to deal with a broader range of life situations, to cope with new tasks and to respond to old tasks in new creative ways" (p. 32). The resulting shift in self-image through this expansion provides growth for self-esteem, allowing for the modification and expansion of self-image. As the self-image expands, possibilities for improved social interaction and interpersonal skills surface, connecting the roles we play (and how well we perceive that we play them) to our own self-image and self-esteem.

The qualities frequently evoked in the drama therapy process correspond to those that describe the creative, self-actualizing individual. The person's spontaneity, playfulness, expressiveness, resourcefulness, imagination, humor, empathy and childlikeness are drawn forth... Within all clients, including those who have been badly traumatized, a pilot light of health remains, and it is for this light, however dim, that the therapist reaches (Emunah, 1994, p. 28).

When adding the verbal component of qualitative research, the narrative created is likened to the construction of portraiture: framing an image in context (setting, actors, themes) and creating an authentic representation of the experience as a whole picture. Sarah Lawrence Lightfoot (1997) in her examination of narrative and artistic portraiture stated the importance of context in artistic research and noted five arenas of focus:

1. A detailed description of the setting for the site of arts creation,
2. The researcher's "perch and perspective,"



3. The history, culture and ideology of the community,
4. Symbols and metaphors which shape the narrative, and
5. The individual's role in defining and shaping the context.

Here, the narrative is the verbal exploration of the topic, with the actor or artist as the expert on the image or issue. The researcher's role is to provide space for verbal as well as artistic processing of the process, not just the product (art or data), and is essential to honoring and protecting the authenticity of the experience. Lightfoot's work was inclusive of both the researcher's and research subject's experience, and paid specific attention to how the setting and researcher's presence affected the process and product. The observer/participant, another diunital position, simultaneously enriches the data and requires clarity of boundaries and bias.

Black psychologists have long criticized their field as exclusionary. Professor Robert Williams' infamous Black Intelligence Test of Cultural Homogeneity, also known as the BITCH, is a concrete example of one practitioner's fight for contextual assessment.<sup>6</sup> Theories, assessments and diagnoses formed on White, middle class males do not create a level of generalizability. Meaning those who are non-White and/or female will by definition be deviant from the norm: "To continue to ignore the limits to generalizability; the nuances and contexts that are, in fact, psychologically relevant for Black women; and the multiple dimensions of diversity that shape the social and psychological realities of this group will only continue Black women's marginalization in the field" (Thomas, 2004, p. 288). In order to develop tools to

---

<sup>6</sup> Developed as a response to standardized achievement tests which frequently positioned Black students in remedial classes and labeled them intellectually deficient, Williams' test included vocabulary and cultural themes prevalent in the Black community, rather than based in the dominant culture's experiences.

accurately assess and treat Black women's mental and physical health, the complexities of their lives must be addressed.

Jacqueline Mattis (2000) suggested that future "...multi-method approaches that allow for examination of religiosity and spirituality within and across various relational, institutional contexts" (p. 120), which seems to hold the door open for arts based studies. An expressive therapies approach incorporating religious imagery, which several studies have cited as an effective coping mechanism for this population (Brome, Owens, Allen, & Vevalina, 2000; Gibson, 2006; P. D. Morgan, Gaston-Johansson, & Mock, 2006; Propst, 1980), could prove effective in decreasing depressive symptoms. Researchers have called for the inclusion of the meaning-making process of African American woman in clinical treatment, acknowledging that differences in terminology between client and therapist, as well as the importance of including issues directly related to clients' value systems and experiences, may positively affect therapeutic outcomes (Greene, 2008; Moore III & Madison-Colmore, 2005; Propst, 1980). In exploring the self image of Black women, embodiment, art, and sensitivity to the intersections which affect how they perceive themselves must be carefully balanced in order to construct a relevant study of and effective interventions for this population.

The effect of controlling stereotypical images on the development of African American women's self-image is damning as well as damaging. Relegating one to the "no win" situation of being seen as too strong to need help then condemned for the coping—or lack thereof—which leads to more devastating illness or compounding of stressors. Black clinicians who have examined the cultural implications of inappropriate assessment and diagnosis call for more creative interventions based within the cultural context of the population (Mattis, 2002; Thomas,

2004). The current study attempted to examine these concerns with expressive therapy processes by providing an arena for Black women to explore their own self-perceptions and compare this to how they feel they are perceived in order to define and clarify concerns regarding self-image and its effect on self-care.

## CHAPTER 3

### Method

The current study sought to explore the self-image of African American women, ages 18-65. The data collected, via experiential activities, art making and interviews, was examined for traits of controlling or stereotypical images and whether (and how) these images impacted what these women felt they must present to the world—which side of the mask is exposed? Participants were recruited via website ([www.MosaicArtsTherapies.com](http://www.MosaicArtsTherapies.com)), email, word of mouth and fliers. Ohio participants were identified through collaboration with The Lesedi Group, LLC, which made contact with women who fit the study profile through professional connections. The principal researcher then contacted interested parties, forwarding questionnaires and consent forms to be printed out, completed and brought with participants to the focus group. Of the sixteen people who confirmed their attendance for the Ohio session, seven participated; all present volunteered for the two minute exit interview. For the Largo, Maryland group ten people were recruited, however only three attended. All agreed to the interview. Eight women were recruited for the St. Paul workshop and six for the Landover Hills workshop. Table 4 outlines the recruitment efforts and actual attendance.

Table 4

## Focus Group Recruitment and Attendance

Focus Group Site	Recruited	Actual Attendance
University Heights, Ohio	16	7
Largo, Maryland	10	3
St. Paul Assisted Living	8	2
Landover Hills, MD	6	3
TOTAL	40	15

Prior to participating in the focus group, participants were given a questionnaire in order to quantify socio-economic status and control for current mental illness treatment—which would make the respondents’ answers ineligible for inclusion. Of the forty (40) women identified as appropriate for this study, a total number of fifteen ( $N=15$ ) participated. The mean age of participants was 49.8, with two outliers on either end of the spectrum: one aged 33, the other 65. The mode age was 44 with a median of 52. Although many of the respondents were unemployed ( $n=9$ ) more than 50% ( $n=10$ ) reported incomes of \$35,000 or higher from alternate sources of income such as pensions and Social Security. All ( $n=15$ ) identified as heterosexual and most (90%,  $n=14$ ) rated their health good to fair, with a sole respondent endorsing “excellent” health. Although three women reported a past history of a mental health diagnosis, none of the respondents endorsed current mental health treatment or taking prescription medications for mental health. The women were split regarding interpersonal relationship roles, with about half ( $n=6$ ) claiming romantic relationships and caregiving responsibilities ( $n=8$ ). All but one

respondent claimed affiliation with organized religion, most ( $n=8$ ) reporting weekly or monthly ( $n=3$ ) attendance; with single respondents each endorsing annual or sporadic attendance.

Although multiple means were used to identify participants, the most effective was word of mouth. Many of the women stated knowing someone who had participated in a prior group or, as in the case with the Ohio and St. Paul workshops, trusted the person who was sponsoring the event. This trust, based on professional or personal relationships was often given as the main reason for participation, despite the verbal support this researcher initially received for the stated purpose. Women who were approached for participation responded with excitement, many stating being able to “focus on *us*” as an attractive topic. However, after reading the consent form, the excitement frequently turned into hesitance. This researcher was repeatedly confronted with the statement “I just don’t want to put my business out there like that.” After assuring each potential participant that they did not have to do any part with which they were uncomfortable, some opted out and others, although visibly less enthusiastic, soldiered on. The literature supports the notion that African Americans as a culture are wary about exposing pain, being vulnerable, out of fear of having the weakness exploited, and that being Black and female is not enough to make you or your work relevant and credible to the Black community (Beauboeuf-Lafontant, 2009; Copeland, 1977). It is not enough to look like “one of us.” Similar values, mutual respect, and a sense that your work is intended to affirm and uplift, not criticize or condemn are often determining factors.

While seated in a circle, participants were led through an activity to introduce themselves. Group work continued either by dividing the women into smaller groups (Ohio workshop) or allowing smaller groups to come together and explore sculpting themes prepared

by the principal researcher (strength, support, beauty, protection, spirituality, and intelligence).

Scarves were provided for a sculpting exercise and participants were allowed to add to or change their creations adding sound and movement.

The drama therapy section of the focus group was conducted in the manner of Jacob Levy Moreno's three tier process: warm-up, enactment, close (Moreno, 1972). For the purpose of this study, the original three section process was utilized as 1) therapeutic intervention was not the object of the session, and 2) for the sake of time, a condensed group experiential was required. Cultural roles were explored through embodiment, as groups were invited to enact through movement and tableau their views of the various worlds of each role.



**Figure 1. Sculpting Exercise, Ohio Group (#1)**





**Figure 2. Sculpting Exercise, Largo Group**





**Figure 3. Sculpting Exercise, Ohio Group (#2)**



**Figure 4. Sculpting Exercise, St. Paul Group**

As the aim of drama therapy treatment is “to help people find balance between their contradictory roles, such as that of victim or survivor, and to learn to live with their role ambivalences” (Landy, 2005, p. 96), providing an arena for Black women to explore roles they relish or resent was crucial to the process. After the sculpting and verbal process, members were provided brown paper-mâché masks to transform, continuing to focus on what people see and do not see, with themes which emerged from the group work. Art supplies, including paints, props (curlers, pipe cleaners) and images from magazines and the internet (no people, just symbols and items) were provided to build upon group work. Symbols, images and words were used by participants to adorn their masks. Ascribing to the position that the creative process is the process, the researcher did not ask participants to share or describe them verbally.

The mask work directive was to continue the theme of what people see and do not see by decorating a section of the mask to represent both. The women were not instructed on how to segment their mask. After participants felt that their masks were complete, they were invited to dialogue with their images with a guided writing exercise (McNiff, 1992). Guided imagery sheets were given to allow participants the opportunity to journal, or dialogue (McNiff, 1992) privately with their masks and were kept anonymous. The final, closing activity involved gathering all masks together and asking each woman to say a word that came to mind as she looked at them.

Brief interviews were conducted on a voluntary basis. All participants agreed to be and were interviewed. Interview questions were designed to 1) get participants’ thoughts on the workshop itself and 2) provide opportunity to further explore themes which emerged from group work, therefore limited follow-up or leading questions were used. Interview sessions varied in

length from five to twenty minutes. The lead researcher made the conscious decision not to use the term “stereotypes” or “Superwoman” during the interviews unless the respondent used them first. Interviews with the fifteen African American women were professionally transcribed (verbalink.com) and analyzed with qualitative software (atlas.Ti). Initial analyses yielded 22 codes which were then consolidated into ten and are listed in Table 6. Codes were used to categorize data from interviews and dialoguing sheets.

## CHAPTER 4

### Results

During the study, participants were asked to sit and commune with their images; to respond in writing to prepared questions posed by the researcher. This dialoguing process (McNiff, 1992) was tailored to assist them in focusing on their own perceptions of how they are viewed. Conversations sparked between the women; issues of education, colorism, prejudice and support surfaced. In this chapter, the dialoguing process is explored, coding of the written and verbalized commentary is defined and the overlapping themes are examined.

I have begun to articulate a concept of self that is inseparable from courage, the determination to speak truthfully, with integrity, to tell a story that has not been welcomed in the world (Rogers, 1993, p. 273).

#### **Dialoguing with Images**

The guided dialoguing sheets provided an opportunity for written reflection. {McNiff, 1992, *Art as medicine: Creating a therapy of the imagination*} All participants were asked to respond to the first two items and were given the choice to respond to one additional question. Item A asked the women to choose three words to describe their mask. All but one did so, resulting in 14 total responses. Table 5 presents responses to item A, each row is a response from a single participant.



**Figure 5. Ohio Focus Group Masks**

Table 5

Guided Dialogue with Mask, Item A: Three Words to Describe Your Mask

Three Words to Describe Your Mask
Hope in Truth, Hope Transforming Truth
Struggles to Inspiration
Independent, Strong, Loving
Plain, Smiling (Happy), Completed
Creative, Simple, Confident
Young, Old, Transition
Colorful, Unique, Happy
Defense, Fun, Woman
Transformation of Self, Trust and Faith in God, Perseverance
Ethical, Uptown, Split
Lively, Purposeful, Colorful
Spiritual, Uplifting, Sad/Confusion
Two-sided, Peace, Split
Comical, Sad, Confused

### **Mask Descriptions**

Eight themes emerged from these responses: conflict, change, strength and autonomy, spirituality, gender, emotion, personality and appearance.



Conflict emerged perhaps as an expected theme due to the duality inherent to the exercise. Noted in the binary examples of “sad/confusion” and “two-sided,” participants also used the terms “split” (two women used this word) and “defense” which seems to suggest a protective factor in the mask. Here the mask is not unlike a knight’s visor, protecting the warrior behind it, the face shielded from attack.



**Figure 6. Largo High School Focus Group Masks**

Change was suggested in several responses, including “Hope Transforming Truth,” “Transformation of Self,” “Young, Old, Transition,” and “Struggles to Inspiration.” The morphing quality of the mask—flexibility to become what is needed—can be a



sign of commitment to personal growth or denote awareness to temporary states of being; hopefulness tempered with realism.

Strength and autonomy were indicated with such responses as “completed,” “perseverance,” “confident,” “strong,” “unique,” and “independent.” “Completed” seems to suggest a merging of the two sides of the mask; an embracing of needed protection and acknowledgement of the frailty which necessitated it.

Spiritual overtones manifested in words like “peace,” “Trust and Faith in God,” “Hope in Truth,” “uplifting,” and “purposeful.” Many of the conversations connected to the experiential portion of the workshop focused on spirituality—not necessarily religion—used as a coping mechanism. Spiritual practices including prayer and meditation, listening to religious music, and studying sacred texts not necessarily connected to a formalized religious ritual (church service) were discussed. This suggests that participants denoted a difference between a relationship with a higher power and engaging in ritualized expressions of same within a formal setting.



**Figure 7. St. Paul Senior Center Focus Group Masks**

The sole engendered response, “woman,” occurred on only one dialogue sheet and was not duplicated in any form. No mention of anything specifically connected to “feminine” was indicated. Nothing that could be immediately considered objectification (sexy, curvy) or role related (mother, protector, partner/wife) was evident. This may be attributed to the age of the

participants, as most were over 40 and the physical attributes of womanhood, however polished the presentation, did not seem to be the focus of their self-image.

Emotions were represented in “sad,” “happy,” “loving,” and “smiling (happy).” Personality traits of “comical,” “lively” “uptown,” “ethical,” “creative,” and “fun,” suggest the mask projects or protects these. Anger, resentment, and fear were notably absent. Appearance was indicated in the word “colorful” used by two participants, “plain” and “simple.” This writer sensed a negative quality in the last two; a feeling of judgment or criticism, suggesting that the mask may not be an entirely protective accessory. To envelope one’s self with criticism exposes an individual to the very onslaught from which she is attempting to hide, which can lead to self-injurious behaviors and contribute to maladaptive coping: “I am ‘plain’ so I am not special and it’s ok for people to mistreat me.” When examining the boundaries women establish regarding expectations of their ability to serve in a particular role, what may be communicated is “I ignore my needs, so you can ignore them, too.”

Respondents often shifted tenses during the interviews and on dialoguing sheets, initially talking about “we” then distancing with “they” when discussing what people need to know but may not understand about Black women. Relationships, being “in the world,” wearing masks, and a desire for intimacy—not solely with romantic partners but with other Black women—were issues raised in interviews. Many expressed concern for how they were perceived, fearing judgment, criticism or lack of support, lack of connection to other Black women, and the suppression of their needs and feelings in deference to the Black man’s. Many stated a desire to have more opportunities to join with Black women in a setting not connected to anything else, but noted feelings of initial suspicion and hesitance to participate due to lack of understanding

(What is this about?), exposure and vulnerability (I don't want my business out in the street.) or suspicion of malicious intent (What are you using this for?)—all concerns addressed by this researcher multiple times when securing consent. None of the women, however, expressed these concerns upon completion of the workshops. This suggested, at least to this researcher, that the benefits of unconditional acceptance in a safe place can outweigh the risk of exposure.

### **Explore & Define Images**

Although each group's work elicited laughter and comments about “not being alone in this,” most participants stated a preference for the individual art process. The ability to sit quietly, or not so quietly depending on the group, and focus on yourself—not a cause or someone else's agenda—seemed decadent. Many stated it was “refreshing.” The dialogue sheets provided contained questions and room for responses, but were left anonymous; no names accompanied the quotes taken from the forms. One respondent wrote more than three words in response to item A:

My mask is a depiction of a woman with struggles of life that brings [sic] about wisdom. From that wisdom, we can inspire others. Our struggles are meant to teach us an extraordinary thing, we can use it to support and encourage others.

The women were not given a time limitation to complete the dialoguing process and were encouraged to sit with their masks; to commune with the art and each other (McNiff, 1992).

Although the directive was to identify three single words, many elected to write phrases, seeming unable to consolidate their thoughts into three words. Each group of women was a unique mix of class, level of education and self-reported comfort with art, dramatic or visual. However, themes

of hope, being “split,” truth, and spirituality were recurrent. Their responses to item B were just as varied: How do people’s perceptions of you affect what you reveal or keep hidden?

Woman #1: I reveal my availability—ever present intuition. Hidden—The desire for me or the assurance that I have done my best well [sic].

Woman #2: Today I am not concerned with others’ perceptions or expectations. From my family, friends, and church, I was able to observe others and I choose to just be me, the best me I can be.

“Today, I am not concerned,” infers that there was a time when she was. Maturity and processing with a support group (family, friends, and in church) allowed her to acknowledge, but not necessarily use her mask.

Woman #3: Sometimes too much. I worry about what others say which makes me keep my feelings [sic].

Fear of judgment may have cemented this woman’s mask in place.

Woman #4: It’s not for them. They perceive what they want. I am always shocked to know what people think about me. I want “me” to catch up and surpass what I am putting out NOW! I have been hiding to get over what I don’t want to reveal anymore because I am tired of fear slowing me down.

Initially presenting as a statement of self-assurance, Woman #4's fear of revealing what she is "trying to get over" speaks to discomfort with vulnerability. Here, the mask seems to be the preferred persona this woman is trying to "catch up" to, not simply hide behind.

Woman #5: I feel awkward and unsure of myself and I'm afraid of being perceived as strange or odd.

Echoing Woman #3's comments, Woman #5 notes fear of being judged, or seen as "other."

Woman #6: As we age, people's reactions to you make you either want to share more of your experiences (valued) or keep your experiences to yourself (de-valued).

Another intersection, that of age and gender is presented here, as Woman #6 discusses being embraced or shunned due to other's perceptions of her competence—her experiences valued or discounted because of her age.

Woman #7: People often think that I have it all together when in truth I don't. They tend to think that I don't need help when I actually do. Sometimes people assume I'm very strong and some even get a bit defensive around me—until they have a conversation with me and learn how much of a fun person I am. I keep my pain hidden.

Although not called by name, the above could be said to reflect traits of Superwoman. People "often think" she has "it all together," and she does not refute the perception.

Woman #8: People tend to draw on my strengths, expecting me to be a rock when their worlds are falling apart. Yet I draw on God's wisdom, praying for revelation and discernment about their dilemmas. I hid [sic] my uncertainty within myself.

The personified lie of "I've got this" is fueled by the mask, not contradicted by it, shielding the woman from the ridicule expected when she cannot measure up. What remains unexamined is whether "...these women have unconsciously selected peers, mates, and other relationships with people who are comfortable with their tendency to deny their personal needs" (Thompson, 2000, p. 249). In other words, are these women choosing friends and lovers who respond to the mask and make no effort to look underneath, in effect reinforcing the lie the mask represents?

Woman #9: Because of my outward appearance, many perceive that I only like "high class" educational activities. I am very fond of my Afro-American heritage, and the many diverse talents of my people of color. I also enjoy having had varied type [sic] of experiences and tastes.

Here, the intra-racial practice of colorism is inferred. "High class" is often synonymous for fair skinned Blacks. This woman's experience with being judged by her skin color was repeated during art making.

Woman #10: People's perception is that I handle all life's challenges without any fear, anger, or rage. So for the most part it is hidden (I think), or it is controlled.

Woman #11: People tend to see my love, generosity, and helpfulness and they can't adjust to when I go through disappointment and stress.

Woman #12: People expect me to have everything in place and under control. I keep my problems and how I feel hidden.

Women #10, #11, and #12 all seem to have confronted unrealistic expectations. Acknowledging attempts to control or hide while noting real feelings of "disappointment," "stress," and dealing with "problems" suggests a struggle to balance the ideal image (others' perceptions) and the real person.

Woman #13: I have been perceived as a goody two-shoes, but want to do and say inappropriate things—sometimes to not be the odd person out.

These responses suggest participants kept things hidden out of concern that the observer may not be able to handle or support the individual's truth, making any revelation of emotion—other than that which the observer expected and is considered appropriate—dangerous for the woman. To expose herself to someone who cannot support her, encourage or protect her creates another opportunity to be wounded.

One participant seemed more comfortable with the interview process than the dialoguing sheet. The following was the only written response she provided: "I do not reveal all of who I am to everyone. I protect myself by observing others and revealing only what is necessary for the work situation or social situation." During the interview, this 64 year old African American woman presented her experiences with the limitations of the work world. In the field of accounting, she had excelled academically but seemed to be "pigeon holed" when seeking



employment and promotion. Recalling being one of very few women in any mathematics class (college in the 1970s) and usually the only Black female, she painted a picture of having to be at her best at all times.

**Cheryl:** When I transferred from Howard [University] to the University of Illinois, I was an accounting major. And University of Illinois had a ten percent minority population back in the late '60s, early '70s. And blacks who were in the Business School tended to be in business administration. There were very few blacks in accounting, very few females - white or black - in accounting. So, in most of my classes, I was the only black female. So, teachers learned your name very quickly. You had to be on top of your game because you got called on.

Institutionalized racism resulted in the double edged sword of tokenism. You might be the only Black and one of very few women, allowing schools to take advantage of government subsidies. Feeling honored to be able to continue your education, while simultaneously feeling extreme pressure to prove you have a right to be there and can compete and succeed; yet another example of Walker's "insider/other." The glass ceiling that White women have experienced, that see-through barrier that keeps them from reaching the same professional heights as their White male counterparts, was often a concrete roof for Black women, who were frequently told, directly or through lack of promotion, that they had gone as far as they would be able to go. Add to these limitations "a new set of stresses related to mobility" (Gibbs & Fuery, 1994, p. 561), which included increased competition with Black males and White females in the workplace, and the fortitude of historical coping mechanisms must be reevaluated for effectiveness. Women who

experienced these setbacks and disappointments were followed by a generation who would be suspicious of therapy or even education as viable options for improving their lives.

**Dean:** You have to keep that [in] mind, too, because a lot of times sessions - not necessarily this one – but sessions, they feel as if they’re the key to everything, and you need to hear this, and this is gonna help you.

*Researcher:* This is gonna change your whole life.

**Dean:** Exactly, exactly.

*Researcher:* Today.

**Dean:** Yeah. And so, sometimes people come with that expectation, that they’re gonna be changed and they literally - you know, and it can be disappointing. It can be a setback because they really at that time needed something, but whatever was being offered at the time wasn’t necessarily what they needed. But they’re just constantly looking. But you’re disappointed sometimes when you don’t get what you’re looking for.

Here, Dean seems to touch on the chronic desperation inherent in living in survival mode and looking for a way out. This state of constant need may result in one learning how to “work the system” and, in some instances, expressing a sense of entitlement (“I’m a tax payer, you work for me!”), and have fueled the stereotype of the Angry Black Woman, an image made more negative by some politician’s view of “Welfare Queens.”<sup>7</sup> The movie *Precious* depicted the title character’s parent as an example of learned helplessness and expectation of failure. Another

---

<sup>7</sup> Although Ronald Reagan’s story of “...a woman in Chicago [with] 80 names, 30 addresses, 12 Social Security cards...collecting veteran’s benefits on four, nonexistent [sic] deceased husbands...” (Unknown, 1976, p. 51), was a work of fiction, it was based on a real woman. Linda Taylor was prosecuted for fraud in Illinois and the derogatory image of poor Black women taking advantage of subsidized programs stuck and is “rarely questioned” (Jordan-Zachery, 1997, p. 36).

mutation of Mammy, Jezebel and Sapphire, served to “mask and normalize the inequitable position of Black women” (Jordan-Zachery, 1997, p. 36).

### **Naming the “Self”**

The last three items (C, D, and E) were optional and participants were asked to complete only one of them. The questions were as follows:

(C) What gifts does your mask bring you? What burdens does it place on you?

Creativity and pizzazz. Covering some inappropriate behavior.

It gave me peace to create.

Reveals/expresses my strengths/hides my insecurity.

It brings a revelation to my inner emotions. It’s not a burden.

Wisdom, independence, beauty.

My belief in a power greater than myself. Holding, keeping too much to myself.

My mask [brings] the gift of perseverance. I can do all things through Christ who strengthens me and then inspire others. When I don’t feel like it, I must keep moving on, [if] only in the hopes to encourage someone else.

Here the mask hides fatigue, in effect allowing the observer to “lean” on a woman who feels depleted but not at liberty to acknowledge it due to her perception of someone else’s need being

greater than her own. The support of spiritual practices coupled with the cultural expectation to “help somebody along the way,” are values found in many African American communities.

(D) Give your mask a name. If it could speak, what would it say to you?”

Clown Face—Girl, I am looking at you at all times.

Florence—always be your best. May God bless you always.

Metamorphis [sic]

Powerful—It’s ok to share your load.

Precious. Be yourself and don’t be afraid to be who you are, even if someone’s perception is different from what you are feeling or doing. I like both sides of me and don’t care anymore about the perception of others. Amen!

Versatility

The Double Personality. Be yourself and say what you think.

Double Take. Which side do you take?

(E) If you could change one thing about how people perceive you, what would it be?

Not to always assume I know what I am doing. Most of the time I am faking it and praying to understand along the way. Eventually, I grasp the concept!

Let them know I am not a threat and I will be [there] when they need me.

Not coming across as angry.

I would change the notion that I am too old to contribute.

That I am not standoffish or mean.

People perceive me as not needing help. I need help!

The perception of me as an angry Black Woman.

That I'm unapproachable.

Realize that "rock" needs to be strengthened, too.

I am HUMAN and DO NOT have all the answers.

These comments illustrate multiple instances of the rejection of unrealistic expectations, rejection of the Angry Black Woman persona and ageism, and the need for support.

### **Colorism**

As the women created their masks and dialogued with their images, conversation spontaneously sparked with themes from the work. One interaction focused on a participant's experience as a college undergraduate and the perception of lighter skinned women as "better." A fellow African American male student had commented on her skin. She paraphrased: "Y'all high yella ladies are alright. Y'all know you'll be ok. But them Sapphires, man, once they get a hold of you they don't let go." Insulted, the respondent reports hitting the speaker, her darker female peer who had witnessed the statement remained silent. During the group, the ensuing conversation included the sharing of similar incidents of being judged by skin color, the Paper

Bag Test<sup>8</sup> and the premium placed on smooth hair textures, and the expectation to rise above it.

Decades removed from the incendiary conversation, it seemed to bother her still. The lead researcher asked her to elaborate on “Sapphires” during the interview process:

**Linda:** Well, in my generation, Sapphire was the wife of Kingfish in the television show called *Amos 'n' Andy*. And Sapphire was a big-busted, big-hipped, hands on the hip, loud, and pointing her finger at her man, telling him what to do and what not to do. And that was the caricature of black women. I think several, very well-known Afro-American women have alluded to this in questions similar to this, and they’ve alluded to the fact that they like to be looked at as who they are and not as this perception of this negative quality. Even though, in many ways, Sapphire is not negative, because Sapphire was who she was to survive at that particular time.

The problem of the Color Line (DuBois, 1969) continues to be a measure of beauty for Black Americans, though there is research to suggest that the importance of hue depends on the social context (Harvey, LaBeach, Pridgen, & Gocial, 2005). Harvey et al (2005) conducted a study with results indicating that the darkness of one’s skin mattered less when Blacks were the minority (on predominantly White college campuses, for example) than it was within a majority Black environment (Harvey et al., 2005, p. 247), where it seemed to matter more. This participant’s anecdotal data seems to support these findings, identifying colorism as a prevalent issue surrounding beauty and Black women. However, it was not an emergent theme in the interview data, as Table 6 illustrates.

---

<sup>8</sup> The paper bag test is an example of intra-racial racism within the African American community. If you were darker than the paper bag, you were often ostracized from certain societal circles.



Table 6

## Initial and Consolidated Codes

Initial Code	Consolidated
Boundaries	Boundaries
Black Women as All the Same	Self-Care
Black Women as Caricatures	Strength
Black Women Defining Strength	Stereotypes
Black Women's Diverse Humanity	Self-Image
Black Women Limited	Trust
Black Women Love and Intimacy	Community
Black Women More Than Bodies	Caregiving & Weight of Pressures
Black Women Not Superhuman	Support
Hesitance to Engage	Spirituality & Coping
I'm Not Alone	
Legacy of Motherhood	
Multiple Roles	
Others' Expectations	
Perseverance Perceived As Strength	
Rekindled Creativity	
Spirituality and Coping	
Strength of Community	
Support Expected and Found Lacking	
Support Given	
Trust Issues	
Weight and Pressure	



## Codes Defined & Explained

*Boundaries* were defined as acknowledging others' rights to make their own decisions and deal with the ensuing consequences, without "taking on" the responsibility of "fixing" situations or people. It also involved consolidation of emotional resources in order to get past disappointment.

**Anne:** Well, for instance, like my son's going through girlfriend issues, and I feel emotional for them because you want - as a mother will want more for them. So, you kinda put yourself in situations that really are not your own, but you want the best for them. So, just relax a little bit; let them handle their situation and not be so aggressive to say, "Well, you know, you guys need to do this. You need to do that." They'll learn. So, just start just relaxing a little bit.

Anne noted the transition from parenting young children to parenting young adults, identifying the necessary shift in boundaries.

**Deborah:** I got a lot of stuff going on I didn't know - you know, that I never explored some things. I never had a chance to explore some things because I've been so attuned to what my husband wanted, or what somebody else wanted. I never knew what I wanted.

Being able to identify and combat enmeshed boundaries can only occur when the individual self is acknowledged. Deborah discussed the separation of her wants from those of others, noting it occurred later in life, highlighting the sacrifice commonly expected of female caregivers.

**LaReine:** And a lot of times they say they think that I'm a very strong-willed person, very tough.

And sometimes I am, but they don't know that that's part of the shell that had to be created in order to deal with the things that disappointed me, or that meant that I had to be strong for my family in order to accomplish the things I needed to accomplish.

Here, LaReine identifies the mask itself as a boundary to bolster her through difficulty by projecting confidence and strength she did not always feel.

*Self-Care* is defined as making one's needs a priority and accepting responsibility for one's own wellbeing. Self-care differs from boundary setting in that the focus is on the active engagement of improving and protecting health—physical and emotional.

**Paula:** I guess one of the things that I'm leaving here with is I need to get more in touch with things that I used to do. I used to paint and draw and do things like that. I don't have time to do that anymore, so it was relaxing just to do that. And so, I think I need to get back to doing some of that.

Self-care surfaced during conversations over individual art making. Comments focused on the enjoyment of creating—forgotten and replaced with the business of caregiving or professional development. Doing something for the sake of pure enjoyment, the fulfillment of creation, and quiet time to be introspective—not connected to spiritual practices—was embraced.

*Strength* is defined as fortitude to make unpopular decisions and usually involved a caregiving or motherhood role. It also involved defining what was important regarding a legacy—what she wants her charges to take away from their experiences with her, or what she had learned from her own mother. Strength was explored in relation to its use to nurture, protect or teach others.

**LaReine:** I think that they need to realize that there's a lot more depth to us than they've allowed themselves to think. Most of them see us as objects of - they see the bodies as objects of sex. Okay? And in many cases, they don't - they see us as something that they can use, a body that they can use, someone to be able to conquer that. But underneath all of that, there's an inner strength that's allowed us to survive and has allowed us to build and maintain the families that we've been able to develop, as well as to maintain our own sanity in order to accept what it is we've had to be faced with in our lives.

For one woman, strength surfaced in the decision not to continue the legacy of distance and mistrust she had experienced with her mother. Respect for elders is at the core of African American culture, with only very recent decades witnessing the seeming deterioration of this reverence. For this woman, open and public disagreement with her parents was unheard of, but the choice of how to raise her children was her own.

**Deborah:** My mom used to be an alcoholic, and she used to cry all the time when she was pregnant with me. She said, "A lot of times probably why you're so sad, 'cause I was sad myself." You know, I think about that, and I say, "All the things that my mom was, I'm not gonna be. I'm not gonna be a alcoholic. I'm not gonna hate men. I'm not gonna distrust everybody because I want to be loved. So, I'm different with my children. I'm

very emotional with my children. I hug 'em all the time, "Let go, ma." You know?

Forty-year-old going, "Dang, ma, get off of me." You know? But that's just how I am. I want them to feel the love at home so they don't have to go out looking for it in the wrong places.

*Stereotypes* are images imposed by others; superficial characterizations of behavior. The women commented on others' expectations and compared them to how they wish to be viewed.

**Dean:** Black women are not a monogamous or monotone group, many-faceted - facets and that you just can't lump them in a group. I mean I know we have a tendency to do that with anybody, stereotype, and I think the black women, because a black person is usually at the bottom of the totem pole, the black women are even lower than that. So, we really don't get the respect I don't think that - we're either Bs [bitches], come across as that, I mean, where just - we're many things, but most a lot of the negative. And so, we need to emphasize the positive, not just the outside beauty either. You know? And not just the intellect, but just all of it as black women. But I guess the biggest thing is we're not all the same.

Dean comments on the categorization of Black women as "this/or," noting that attempts to label result in many falling short of the perceived expectations.

The next two respondents were the only participants at the St. Paul site. Admittedly close friends, they were not residents of the facility and scrutinized the consent forms prior to signing them. As they were a small group, the use of objects in the room to assist

with sculpting exercise (see Figure 4) were allowed. Highly educated and opinionated, discussions revolved around expectations and stereotypes with little direction from researcher.

**Willistine:** I just think that there should be more of a platform for black women to just be who they are, without the label that someone else gives them, and that should be appreciated. And not feeling guilty if we don't live up to someone's label of our strength and our dominance or what have you.

Here imposed labels are rejected. The importance of self-defining Black womanhood is expressed.

**Linda:** Black women, I think, are looked at in a negative light by the majority. And that is that we're looked upon as the old character of the '40s and the '50s of Sapphire. And they - if we do not act like Sapphire - in quotation marks – then we're, “Well, you're different,” or, “You're not like other people. You're not like the others.” That's usually the statement that you get. And I like for black women to be looked at as an individual, as themselves, as they like themselves to be looked at, and not lumped into any one or a negative category.

Linda went on to explain Sapphire as she experienced the stereotype. An older image, Sapphire may not be as recognizable by name to younger generations; however her traits, as discussed earlier, are evident in contemporary television shows. Linda's reference to the stereotype suggests its power has not diminished with time. Her concern with how her comments and art work would be used seemed to focus on fear of misrepresentation and how the information gathered would be used to help, rather than further hinder Black women.

*Self-Image* differs from self-identity in that it is not connected to role. Identity is relational as Black women, much like women of other ethnicities “...define themselves in terms of significant relationships, rather than defining themselves through separation, beginning with the mother-daughter dyad, extending to the family, then to the minority community and finally to the majority community” (Gibbs & Fuery, 1994, p. 562). Here, the participants were encouraged to be introspective and explore what they value as opposed to others’ expectations of them.

**Cheryl:** It caused me to think, and sometimes that’s hard for me to - I know myself, ‘cause I’m deeply analytical, but sometimes putting it - writing it is hard. I do what’s necessary to accomplish my job. I do more than necessary for it to be accurate and complete. But to me, that’s just part of doing my job, and I’ve now have learned to value some of the extra things that I do. But it’s - I never thought of it as something special.

Doing “what is necessary” regardless of other’s perceptions or expectations illustrates a sense of self or authenticity—of being comfortable just being who she is and not viewing it as anything “special.” This lack of being “special” or the avoidance of the desire to experience something more seem to support the façade of African American women as unfeeling, allowing the myth of infinite resources and strength to persist.

**Deborah:** That black women can love deeply. They can be very understanding, and they can be behind you 100 percent. But you get ‘em wrong and mmm, you got something on your hands. Because a lot of people - a lot of people I’ve heard speak - and especially a lot of black men, you know, “Black women are angry.” But a lot of ‘em are misunderstood. A black woman, most that I’ve seen, they want to be loved, but they want to be loved in the way that they think that they are considered being loved. ‘Cause a lot of times, it’s not

even about the sex or getting the gifts. A lot of it is just intimacy, walking down the street holding hand [sic]. You know? Catch my hand and just doing things or just - you know, just little, small gestures. And you don't see that in a lot of black relationships. Very rarely do you see that.

Here the Angry Black Woman (ABW) stereotype is discussed as a misperception, the sentiment being that many Black women do not experience or desire intimacy in their daily lives. That sense of lack results in resentment, which manifests as anger. Multiple African American women in contemporary reality shows and sitcoms are presented as ambitious (the stereotypical Jezebel-esque gold-digger or the hyper-driven professional), suspicious of their mates or eager to engage in adultery (for example in *Basketball Wives*, *Being Mary Jane*, or *For Better or For Worse*). Deborah distanced herself from the response, using "they" instead of "we" when discussing the need for intimacy, seeming to suggest rejection of the image as it relates (or does not) to her.

*Trust* is the ability to accept support and lay aside one's own preconceived notions of what a Black woman "should" be or has been in previous encounters. Wariness about interacting with other, unfamiliar Black women involves fear of being judged.

**LaVedia:** I still think, as black women, we have a tendency for not just self-hatred, but dislike -

I'm not sure if that's the word - of other black women. I think a lot of times instead of us celebrating one another, we spend time knocking each other down, which may be the result of the world that we live in more so than anything else.

**Deborah:** Well, it's really nice because a lot of times, especially with me, going to a group of women, and a lot of women are very standoffish, these women are very warm, very open,

which I like very well... I think we all - women as a whole, we tend to be distrustful sometimes or - well, I was brought up that women are conniving. You know, never trust another woman. But I found that not to be true.

**Anne:** And trust issues a lot, too, because so many things happen nowadays in relationships that you really have to put yourself aside and not dwell on the little things, but learn to trust and communicate with each other as women and as women in relationships. You know, like a woman is at the store, and her tag was sticking up. And I said, “Ma’am, if you don’t mind, I’d like to put your tag in.” And she said, “I am so -” She said, “You’re a good woman because a lot of women would let me walk around looking like that, or would talk about me, or took a picture of me and put it on YouTube.” She said, “Not a lot of women won’t even give you a compliment or help you as a black woman.” You know? So, being there for other black women.

The fact that engaging in an activity with other Black women—with strangers—felt “warm” or that another woman would appreciate a random act of kindness, as well as the fact that these incidents were surprising and unexpected by the participants speaks volumes. The hesitance to engage conditioned by the lesson that Black women are “conniving” or hostile, a boundary projected by the mask, was neutralized.

*Community* acknowledges shared experiences and responsibility to offer and receive support. The feeling of “I am not alone,” validates one’s experiences, feelings and moods.

**Deborah:** A warm sense of I’m not in this by myself. A lot of things that’s happened to women, we think we’re - well, just I’m saying for myself, I think that I’m the only one it’s



happening to. When you share some feelings, a lot of times it's happening to somebody else; they just never spoke up.

**Anne:** And the one most important thing, you're not the only one dealing with stuff. And that was revealing.

**LaVedia:** Well, it was good to see that other women feel some of the same things, or most black women, I guess, feel some of the same things. I think it offers is an opportunity for women to identify with one another and share those burdens with one another. And in doing that, gaining that strength to make it one more day, or learning that you're not out there by yourself, and that other people feel those same things, and to share with one another how you made it through. I think activities like this help sisters to make it through.

*Multiple Roles & Weight of Burdens* discusses pressure experienced somatically. Stress experienced as pain, responsibility experienced as heaviness or weight.

**Anne:** They don't understand black women have a lot of weight on them, being black women, as far as being mothers, nurturers, providers for most and - and monogamous relationships. They don't have a male to do the providing, so we tend to step up to be mother and father a lot.

**Paula:** I think there are a lot of pressures that are on black women that aren't necessarily on other women. And I wish there were a way to wipe out some of the pressures that we have to deal with.

**Joann:** ...many of us carry a lot of burdens and still have to go to work. You know, still have to go to church and do what we do in church. But a lot of us keep things - I don't like to say "hidden," but we don't walk around telling everybody about the things that we're going through with our children, with our husbands.

Joann went on to discuss how the fear of being judged affects what she shares.

**Joann:** Like, for example, I have a son in prison. I don't talk about it a lot because it's just - it's a heavy burden for me. So, that's one thing people should understand, that we have a lot - we carry the household. You know, we have a lot of things that we have to deal with, and still come out and look good, and be professional, and it's a lot.

*Researcher:* Okay. Are there any other thoughts, questions, or concerns coming to you now as we end this process?

**Joann:** Yeah, maybe I shouldn't have said I have a son in prison.

*Researcher:* What makes you feel like you shouldn't have said that?

**Joann:** Because I don't want to be judged or anything on that. You know?

*Researcher:* Do you think that's why a lot of us walk around and don't share things that are happening, for fear of being judged?

**Joann:** I think so; I think so. As a mother, I think so. And I'm not ashamed of that. You know, he's a grown man, and he did what he did. But sometimes people don't understand when you have a spouse in prison, or a child in prison. Some people may think you didn't raise your child right, when in fact, you did. And it was his choice. You know?

*Researcher:* Like it's a reflection on you?

**Joann:** Exactly. And it's not necessarily a reflection on me, especially since the person is an adult. Just sometimes, you know, I don't know if I should share that stuff. You know?

*Support* is defined as acknowledgement of the need for emotional, spiritual, or behavioral resources which may not be readily available or embraced. The need for on-going support was also noted.

**LaReine:** People come to me for - a lot of times they come to me for consolation, clarification, sometimes just to talk. There are times that they want to - they want wisdom. And there are times that I'm not sure what to say, how to say it. That's where the question mark comes in on the inside of me [referring to her mask].

**Stephanie:** Yeah, I have a question as to what do we do once we get into a place like this, and we share and we experience this moment, and then we leave here? I think as African-American women, we don't keep the bind, the bond together just for ourselves. We keep it together for religion; we keep it together for sororities; but we don't keep it together just because it's what we need to remain healthy. So, the question is what happens now?

In terms of the workshop specifically, one woman noted that not everyone will need the same type of support, adding weight to the research that supports tailoring the services to the specific needs of each population (Moore III & Madison-Colmore, 2005; Neal-Burnett et al., 2011). This seems to transcend race, gender, and socioeconomic status and speaks to values and concrete needs (access to resources).

**Dean:** It'll have an impact on some people. Some people only - it's like anything, some people need more of this, and some people could care less about this. So, the audience is gonna

be the key, but keep in mind that not everybody in that audience needs what is being offered at that particular time. But so you can't stop doing these kinds of things just because not everybody's gonna get what you are saying, or be enlightened...

Anne discussed wanting to share the experience with other Black women not in attendance, but expressed hesitance regarding how the invitation would be received. This suggests stigma of seeking or participating in activities connected to therapy.

**Anne:** I would say this would be something that's offered to a lot of black women, that, you know, just if - a lot of women probably would not even understand it unless they experienced it, if I told 'em, you know, what happened, and what was going on. If I said, "I want you to come to art therapy, art kind of thing," they're probably looking at wall pictures. You know? And that's not what it was about.

Misconception of art therapy, being able to explain "what it was about" illustrates the uneasiness with anything clinical or therapeutic. The discomfort with vulnerability coupled with wariness of psychiatric interventions fuels the stigma of and resistance to help seeking. Increased exposure and access to expressive therapies as well as personal testimonials of Black women who have explored them could help others identify another source of assistance available to them.

*Spirituality and Coping* relates to spiritual practices not necessarily linked to organized religion that are used as coping mechanisms. Although themes may be discerned in how the term is used, there is no single definition of spirituality that is embraced universally (Brome et al., 2000). In order to understand how spirituality influences therapy, Jacqueline Mattis (2002) conducted a qualitative study on African American women to examine how they defined

religiosity and spirituality. She concluded that the conscious choice to act based on beliefs rooted in and guided by religious practice (spirituality) and the observance of religious ritual for the sake of said ritual alone (religiosity) were both elements in the experiences of Black women who self-identified as Christian, but were not identical.

**Deborah:** You just have to open your mouth and tell somebody. Then when you share it, it's okay. 'Cause I always think I'm going off the deep end somewhere. You know? Like mental illness. I have - I'm a very spiritual person, and at one time I used to hear whisperings in my ear, all kinds of stuff in my - my head used to just fill with stuff. I couldn't sleep, and just *[makes whispering sounds]* all the time, all the time. And I had to start praying about it. I mean they were trying to tell me, "Go to the psychiatrist." And I really wasn't getting anything from the psychiatrist, so I - you know, I started praying about it. And prayer's what helped because the psychiatrist, she's just sitting there telling me something I already knew. I knew what to do, and my dad had told me, "You gotta give it to the Lord," because Satan can just get in the head and talk. And I really believe that 'cause there's a lot of stuff that starts in the mind and it just - from there it just starts in your mind, and what you think is what you are.

LaReine noted her mask's illustration of her faith and discussed how it serves her and others.

**LaReine:** This represents trust and faith in God. And I just realized, while I was doing it, that the wisdom comes out through my mouth. Because when I trust in God, and I ask him for wisdom about what I need to do or what should be done, he allows me to speak it. But I wasn't thinking about that when I drew it. It just seemed like it all began to blend as I did it.

*Researcher:* And as I look at your mask, it's interesting the wisdom is coming out through your mouth, but it connects right up to –

**LaReine:** Right up to my eyes.

*Researcher:* - your eyes, yeah.

**LaReine:** So, I'm seeing what - it's giving me discernment.

Discernment, that connectedness to God that provides clarity of purpose is a valued trait in the African American spiritual community (Brome et al., 2000; Colbert, Jefferson, Gallo, & Davis, 2009; Mattis, 2002; Stringer, 2009). Prayer is a petition to God for revelation or guidance; discernment is the response to that petition. Elders in the church are often asked to pray for others, or stand as an intercessor. For Black women active in the Christian church, to be called on to provide such care is an honor and a privilege.

The workshops were not designed to be therapy, but to provide a safe place for "...the images and expressions that [emerged to] become messengers of healing" (Estrella, 2005, p. 197). Although Emunah's (1994) requirement of the modification and expansion of self-image was not a focus of the study, its exploration may be viewed as the first step in this process.

There is a dynamic, interactive relationship between role and self-image: Our self-image

determines our repertoire of roles, and our repertoire of roles determines our self-image...The expansion and enhancement of self-image bring an increased sense of self-worth. This includes coming to know, understand, accept and respect many diverse aspects of our being (Emunah, 1994, p. 33).

All participants were asked "What are you leaving here with?" Responses are clustered below with coding themes following quotes.

**Anne:** The thought that you have to think about yourself, or how you deal with your day to day and put yourself not in everybody - in every circumstance, which is something that I do.

So, I'm gonna take that part with me today, and I need to relax. *Boundaries*

**Patricia:** Inspired to encourage more people. Sometimes you see people, and you speak about masks. When you're in the store, everybody has on a mask. And it's funny how you just greet somebody. You know? Make sure you greet someone, let them know they are worthy. They are worthy. *Community*

**Elise:** Well, first off that I am not alone in the way I feel. But that it's not as bad as I think it may be. *Community*

**Willistine:** I'm leaving here with a renewed sense of being and a renewed sense of self, and affirming - I guess you'd say affirming of me. Being asked to express myself. The exercise with the scarves just brought out feelings that maybe I've been suppressing, again trying to meet the expectations or the perceptions of others. But it just gave me a freedom to say, "This is what I really like. This is what I don't like. This is really the way I see myself. *Self-Image*

**Linda:** A sense of calmness, quietness, that's about it...when I came here I had a lot of things on my mind, and I was able to push those aside. So, it gave me a sense of calmness. I had some thoughts in my head that I needed to push to the side. And so I just came away with feeling calm. *Self-Care*

**Deborah:** With a - just a warm sense of I'm not in this by myself. A lot of things that's happened to women, we think we're - well, just I'm saying for myself, I think that I'm the only one it's happening to. When you share some feelings, a lot of times it's

happening to somebody else; they just never spoke up. And it's okay. A lot of time things happen to me, "Am I cracking up or what?" You know? *Community*

**Joann:** I'm leaving here with understanding that just because people perceive me a certain way definitely doesn't mean that's how I am. I thought about that a lot when I was painting the mask. You know, that two sides - I mean I'm a chameleon, so I like that. I enjoy that there's a lot of sides to me. I like that you know. *Self-Image*

**LaReine:** The awareness that, yes, I have been strong and tough. And I definitely seek God for the information or whatever I need to do, whatever I need to understand in order to help other people. But I'm also learning how to use it for myself, which is something I hadn't - I do, but I don't do as often as I should. *Self-Care/Spirituality & Coping*

**Stephanie:** Hope *Spirituality & Coping*

**LaVedia:** The need to still maintain my sense of strength, but to also be able to share with others what burden I feel I might have. *Self-Care/Community*

**Cheryl:** A little bit more insight of me. Because it's always nice to learn another level of being peeled back. I've always known who I am. I've always been introspective. But at different stages of your life, you change, and your priorities change. And it's necessary to reevaluate them. But sometimes certain circumstances, like applying for jobs and having to fill out the résumés, or answering these questions made you look and see where you have changed. Some things that you think are still the same, some are and some are not. So, it takes you to a deeper understanding of yourself, which I feel is always good. *Self-Image*



## **Research, Witness, Respond**

In many arts informed studies, the researcher's perspective and response to the work are included in the data collection (Cole & Knowles, 2008). The artistic journey and the expression of the experience serve as book ends for the process. As witness/participant/researcher, I engaged in my own artistic exploration, creating two masks, a cloak (with my Aunt Norma) and through journaling. My aunt and I discussed Superwoman, this persona of an all-powerful, seemingly non-feeling, "I can handle anything you throw at me" image and how I was struggling with her. I told her about my focus groups and what I hoped to do in them. I told her I wanted to create a superhero cape, full of color and flash and intended to journal with it after each focus group. Her response sticks with me to this day.

"Well, we can check out the patterns available. What kind of material are you thinking of?" I told her something durable. "Will you be wearing it?" I had not considered that. "Your choice of fabric will depend on how you want to use it. Is it a costume or a covering?" I was blown away.

From our conversation, the cape became a cloak. She helped me find material and notions: great, quality wool that was on sale, a cotton blend for the other side, and an ornate bronze clasp. She adjusted the pattern so that it was double sided and helped me lay it out and put it together. What would have taken her an hour to complete took a couple of days due to my schedule and limited skill, but the result was worth it.





**Figure 8. Wearing the Cloak**

In some cultures, the material a cloth is made from is as important as the symbols and patterns woven in it. Craftsmen and women are highly respected artisans in the community. Cynthia Becker (2006) examined the fabrics woven by women of the Amazigh people of Morocco and noted the legacy of artistry handed down in their creations. “Wool has considerable baraka or ‘blessing’ and some of this baraka is transferred to the weavers” (Becker, 2006, p. 45). Becker noted the importance of wool, which, for this tribe, was directly connected to fertility and motherhood. My grandmother sewed, embroidered, and crocheted. She made aprons and handkerchiefs, dresses and jumpers. Although she taught all of her daughters what she knew, it was Aunt Norma who developed a passion for it. She has created quilts for all of her grand-nieces and nephews; their parents get hand-made socks on birthdays. Busy enjoying retirement, I was moved by how eagerly she jumped at the chance to help me. I feel covered by her blessing and the legacy of my grandmother.

The Adinkra symbols provided to participants were also made into medallions, so that I could change their placement on my cloak according to what surfaced for me during the workshops. Adinkra symbols originate in Ghana and are used to adorn everything from clothing to architecture. The symbols were found online through various websites (<http://www.adinkra.org/images>, [Africanhistory.about.com](http://Africanhistory.about.com)) and were free to the public. These symbols and other images were provided to inspire the participants; they were asked to limit their use of words and to focus on symbols, colors, lines and shapes to express what was revealed or hidden. My masks and the medallions made to adorn my cloak (Figure 9), also included Adinkra symbols (see Appendix for descriptions).

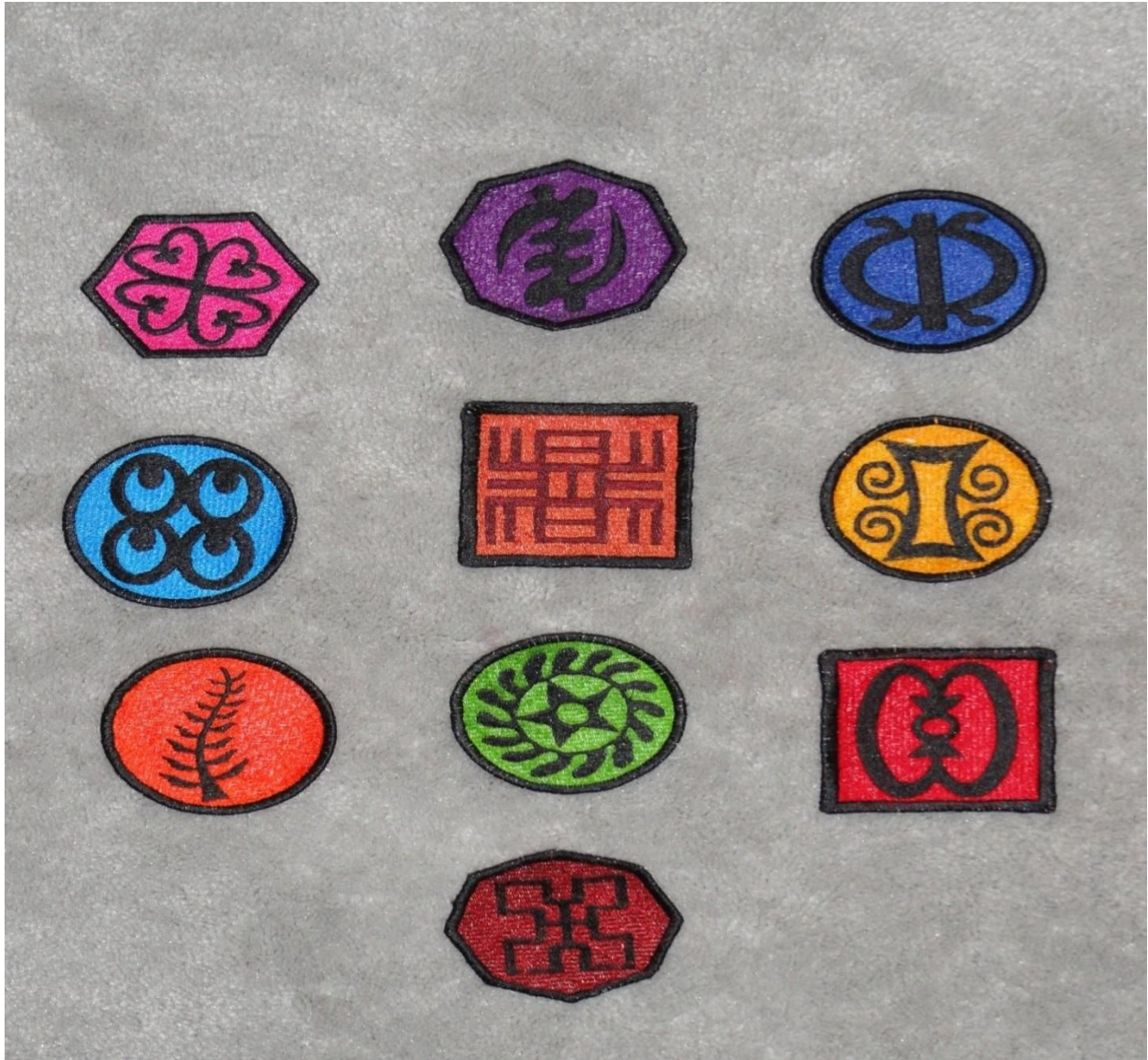


Figure 9. Adinkra Patches





**Figure 10. Researcher Artifacts: Masks from First and Final Sessions**

The first mask (on the left) was created after the workshops; the one on the right was done prior to them. The reverse images are presented here in the same order. The following picture is the reverse of the mask completed after the final workshop.

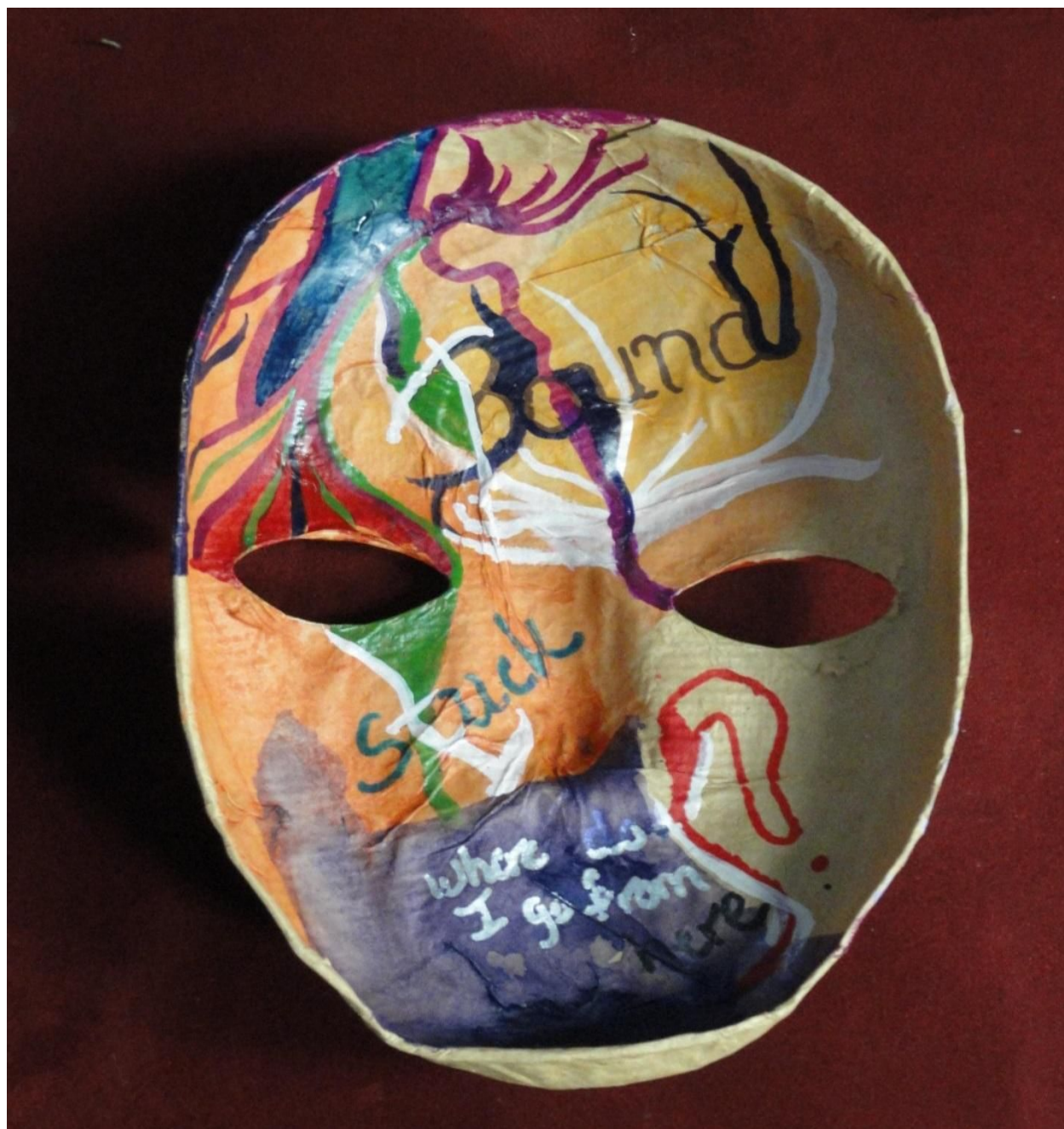


Figure 11. Reverse of Final Workshop Mask

More fluid than the other mask, the colors bleed into each other; fewer but larger words and a sentence (“Where do I go from here?”) suggests weight of responsibility to “get it right.” The connectedness of the word “bound” seems to mirror the intersections of the issues explored.





Figure 12. Reverse of First Workshop Mask

Figure 12 illustrates the uncertainty I experienced as I began to process the data I collected. The responsibility to compile information that was relevant and useful—then to use it—weighed heavily on me, and continues to. Landy’s Role Theory (2005) identifies three types of roles: role, counterrole and guide. Here, the mask itself serves as the guide, containing both seen and unseen elements which were embodied during the group work and through my personal journaling.

### **Researcher’s Dialogue with Images**

The following responses were inspired by the mask above, which was completed after the first workshop held in Ohio.

(A) Choose three words to describe your mask.

Shield, multi-layered, other

(B) How do people’s perceptions of you affect what you reveal or keep hidden?

People expect me to perform tasks, take care of them, fix things. Rarely do people genuinely care about things that affect me, only asking to be polite or worse, to judge the situation or my response to it. Real assistance is hardly ever offered, and when it is, there are usually steel belted, nylon woven, carbon fiber strings attached. My mask provides the “How may I help you?” face, hiding the feelings of unworthiness, alien other and fraud I often feel, allowing me to “get the job done” then move on to the next thing, until my day is done and I can get to my home, my safe place, and take it off—which doesn’t always happen.

(C) What gifts does your mask bring you? What burdens does it place on you?

Gifts: protection, strength (“I can do this.”)

Burdens: People tend to believe the mask and look no further than the surface. It becomes my face, making me unapproachable, unwanted and unwelcomed—the very issues that necessitated its formation in the first place.

(D) Give your mask a name. If it could speak, what would it say to you?”

Name: Abyss. She speaks: All the pain you have swallowed did not get ingested. It has not poisoned you. You have thrown it up. I reformed it; the shell protects you. They can’t see it unless you let them look at you, and few will dare to try.

As I responded to my mask, I became aware that there are some very close to me who do see behind the mask—sometimes offering help, sometimes willing to listen, sometimes just expecting me to “perform” despite what they see (Beauboeuf-Lafontant, 2007, 2009; C. Jones & Shorter-Gooden, 2003). Familial expectations are not affected by my self-perception of lack or ineptitude. The literature supports the notion that women often feel alone in the struggle to balance familial expectations and finite resources available to meet them (Williams, 2009). It may be argued that these concerns are engendered, as women are disproportionately expected to be nurturing caregivers; indeed, women who reject or execute caregiving roles poorly are often ridiculed in the African American community (Scott, 1991; Wallace, 1982). In the workplace, women with families are given verbal support (human resources and legal departments demand this), but comments from co-workers regarding the ailments of pregnancy (“We all have to

accommodate her.”) or caring for elders (“We have to do this while she’s nursing her mother.”)—statements witnessed by this researcher—are not uncommon. Whether male employees are exposed to the same scrutiny is a question for further study.

I continued processing the data in a journal.

## **Journaling**

*Overwhelmed, over worked, underappreciated and underpaid. Do more with less. Exceed expectations with fewer resources and less time. Get the training, get the degree to fight for a job you’re overqualified for. Indebted to the Department of Education for the foreseeable future because you mortgaged **your** future on the hope that education would prepare you for THAT BIG JOB that hasn’t shown up. But the kids did. And your parents aren’t getting any younger. And folk still expect all the hoopla you used to provide before you had all this responsibility. And since quitting isn’t an option, you keep moving. Beyond tired. No tears left. No energy or desire to complain. Too confused to be numb. Feeling some kind of way with no words to describe the perpetual haze your life has become.*

*Or maybe it’s just me.*

*Because of what I have experienced as a practitioner in the mental health field, the focus on keeping caseloads up rather than on positive outcomes, I was inspired to be the change I would like to see: providing an arena for Black women to find and use their voices to define and come to terms with their stuff. So what do I do with this? Themes identified*



*here do not necessarily support the persona of superwoman, but her traits are evident.*

*Am I seeing the mutated 21<sup>st</sup> century Mammy, or is it more complicated than that?*

*Initially for me the image was a superhero's cape, with all the flash and bling (I'm here, have no fear). The expectation being that I will handle whatever is going down. After doing my own arts based exploration of the superwoman cape with my crafty Aunt Norma, the cape became a cloak,*



**Figure 13. Cloak with Patches**

*inferring protection of some sort (hearty outer shell protecting body engulfed beneath). The act being one of shielding from the elements so that you can do what is necessary. My feeling after*

*the focus groups changed the image once more. It now seems a prayer shawl, suggesting ritual and reverence for a ceremonial act: promoting the cause.*



**Figure 14. Cloak to Prayer Shawl**

*The “cause” being everything from childrearing, education, protection, advocacy, support of the Black Man/Family caregiving, and anything else deemed important by the community in which she happens to live. Could it be that the younger generation’s view of “I’m Every Woman” is really a distortion of a woman handling multiple roles because she feels that she must (failure is not an option) but not necessarily that she can (competence)? The wear and strain showing*

*(moans, sighs, Uhms), but not acknowledged as enough of a reason to rest? What does this mean for clinical interventions and the presentation of symptoms for this population?*

From cape, to cloak, to prayer shawl, the covering has mutated much like the stereotypes imposed on African American women. Initially symbolic of a stereotype, the covering has become a symbol of a legacy of survival. Passed down from foremothers, not necessarily explained beforehand, it is as if they bestow it to us: “This is how I made it through. Now I’m giving it to you.” Each woman must decide for herself how to wear it.

Nikki Giovanni’s poem *Hands for Mother’s Day*, discussed strength; unacceptable, undeniable.

I yield from women whose hands are Black and rough  
the women who produced me are in defiance of Porcelana and Jergens lotion  
are ignorant of Madge’s need to soak their fingernails in Palmolive dishwashing fluid  
my women look at cracked,  
jagged fingernails that will never be adequately disguised by Revlon’s new spring reds  
we of the unacceptably strong take pride in the strength of our hands (Giovanni, 1997).  
This strength has been misunderstood, romanticized and exploited by those who have not  
experienced our dual existence of insider/other. “Unacceptable” is often our perception of how  
we are seen, doubly binding us because the strength is there, needed and used, but not infinite.  
As we define our image, we define our strength, and given the appropriate arena, we define what  
ails us, and we must in order for treatment to be appropriate, embraced, and committed to...by  
us.





## CHAPTER 5

### Discussion

Audre Lorde wrote that “when we do not attempt to name the confusion of feelings which exist between sisters, we act them out in hundreds of hurtful and unproductive ways” (Lorde, 1984, p. 170). I submit that, when we do not attempt to name the internal conflicts with which we struggle, the self-harm inflicted becomes a learned, conditioned response we expect from ourselves and teach our daughters.

The current study focused on Black women expressing their experiences as Black women and exploring their self-image. In my work, image is viewed as different from identity. Identity usually involves categorizing labels, such as gender, socioeconomic status or religious denomination. Image suggests a picture, a presentation, allowing for exploration of what is viewed and what is hidden from unknowing eyes. A person can see me as a Black woman, while having no idea of what it means to me to *be* a Black woman. Theories of Black feminism require that the subjects themselves be allowed to interpret data collected on their lives (Collins, 2000; Taylor, 1998) and have identified issues that must be included in studies regarding them:

- Black women as “self-namer” and “self-definer”
- Family centered
- Aligned with the Black male’s struggle
- Respectful of elders
- Adaptable
- Ambitious
- Mothering and nurturing (Hudson-Weems, 1993).

In the current study, “ambition” was not identified in the data, making this the sole omission in regards to these psychologists. Respect for parents, even when the women disagreed with them, deference to the Black man (whether father or partner), adaptable and desiring to identify herself for herself were repeated themes in many of the verbal or written responses. What is unclear in the above definitions is where Black lesbians fit into the discussion of feminist theory, especially where alignment with the “Black males’ struggle” is concerned. The perception from the list, if lesbian issues are assumed to be included, is the further support of the diunital position of this/and, rather than either/or. As Alice Walker wrote: “black lesbians are black women” (Walker, 1983, p. 289) but the invisibility of sexual identity (unless it is to be assumed under the “self-namer” and “self-definer” heading) is a suspicious omission considering the avoidance of the African American community to openly discuss LGBT issues. As no participants in the current study self-identified as lesbian, and the subject of sexuality did not surface during any of the focus groups, these issues were not explored here.

The repetitive refrain (Lightfoot, 1997) of full frontal splitting of the masks was the primary mode of artistic expression, as most participants elected to divide the front of their masks. Although the women were asked to create separate spaces on their masks to represent different parts (seen/unseen) of themselves, they were not instructed on *how* to divide these spaces. The Ohio group (Figure 1) seemed almost evenly split: some making visible barriers on the face of the mask, equally dividing sides; others electing to decorate the front and reverse with images and colors. The second group, which was conducted at a neighborhood high school after hours (Figure 2) also included masks created with the front face “split.” Only one participant elected to put something on the reverse of her mask; the sole image was punctuation—a purple

question mark. This woman commented during the interview that she was in a “state of transition,” and what she “hides” is unclear to her. The third group, which was conducted on a Saturday morning at a neighborhood assisted living facility for seniors resulted in like-mindedness for implements and form. These women, who admitted to being close friends, used feathers, colors and sequins to split the front of their masks (Figure 3). The reverse of their creations remained unadorned, suggesting to this researcher (through the images and their interviews) that the seen and unseen occupy the same space, leaving the onus on the viewer to decide what is perceived, with no seeming pressure on the individual (the women creators) to explain or defend the perception.

The fourth focus group was conducted in the lead researcher’s home on a Saturday afternoon. The intimacy of the setting may have influenced the repetition of form, as all attendees focused on the front of their masks. Two of the women stated a desire to display their work within their homes.

As the groups worked on their masks, I walked among them, sat with them and listened to their stories. Often the women worked in thoughtful silence, occasionally asking questions about materials, cracking jokes or questioning me on my choice of topic and progress with my doctoral journey. The masks I created (Figures 5-7) were created in solitude, as I did not want my creative process to influence theirs. My intention was to keep each group’s process pure and intact, with minimal interjection from me artistically.

Although responsibility of role was a recurrent theme with many of the participants, the visages of Mammy and Superwoman were not evident visually or called by name. Jezebel and

Sapphire may be viewed in some written responses as the desire to hide “inappropriate” behavior, but these statements were made in connection to other’s expectations (what is seen), rather than how the respondent viewed herself. During the interview process, several women made mention of “trying to do it all,” for the sake of family or community, but did not acknowledge or identify stereotypes by name. The sole participant who noted “We’re not superheroes” when asked what people should know and may not understand about Black women, was a thirty-something mother of two. As a majority of the women were over 40 years of age, this may suggest that the expectation of un-ending emotional resources is not embraced by older Black women. Maturity may be the enemy to the Superwoman persona; others’ expectations may not play as significant a role later in life. Themes identified in the exit interviews included anger (rejection of The Angry Black Woman image), militancy, being pulled on for wisdom and consolation, strength, fear of being judged, and enjoyment of self-examination.

Responses of “we are just like everybody else,” seemed to speak to humanity, rather than femininity. The basic human needs of respect, common decency, compassion, care, companionship, food/clothing/shelter are needs for everyone, including Black women. The unique qualities rooted in cultural differences (rural vs. city dwellers and values specific to each), along with spiritual (not necessarily religious) concerns must also be considered. Stated observations regarding lack of intimacy, discomfort with public displays of affection, community with other Black women—non-competitive and unconditional support were expressed. One participant summed up what she thought people should know and understand, stating that Black women want to be “...understood, heard and respected.”

Researchers have noted that internalized oppression, the embracing of prejudices and negative mindsets imposed by oppressing forces, is a contributing factor to Black on Black mistreatment (Beauboeuf-Lafontant, 2007, 2008; Gibbs & Fuery, 1994; Jordan-Zachery, 2009; Pheterson, 1986; Thach & Thompson, 2006; Thompson, 2000; Wilder, 2010). Treating one another with suspicion due to skin color, criticizing the chosen hair style or partner of another Black woman are examples (Gainor, 1992), however, none of these issues surfaced during the workshop. Contrary to what reality television portrays and cultural folklore says about what happens when groups of Black women come together, the topic of discussion seemed to focus the groups' attention on their inner struggles. As many were recruited through word of mouth, and friends asked friends to attend, the groups may have been more homogenous, i.e. similar mindsets leave less room for conflict.

Much like Latinas, who have issues specific to their culture which inhibit participation in seeking mental health treatment (which include availability of childcare, language and/or literacy barriers, and information on access for care) (Myers et al., 2002), African American women have hurdles specific to their cultural heritage which also make help seeking difficult. Hesitance to engage in help seeking behaviors is a significant hindrance fueled by 1) experiences shared anecdotally, from one generation to another, of abuse in the form of racist policies since slavery (cultural), 2) struggles of Black women to be seen as human beings with inalienable rights during the Suffrage Movement (racial), and 3) the challenge to be viewed as equal partners with Black men during the Civil Rights Movement and within the Black church (patriarchy). These intersectional struggles, which cannot be separated by race or gender but must be viewed through a lens combining both, have left scars on the souls of Black women which often resulted in lack

of support for one another (suspicion), being judgmental of each other and wary to take on leadership roles because of it (Pheterson, 1986). When socio-economic status, access to services (including insurance coverage or gaps therein, available treatment facilities and trust in the care they provide), along with the often felt, but rarely discussed weight of intra-racial conflict are considered, getting Black women to seek help, follow through with treatment recommendations and complete a course of care can be tricky, but it is not impossible. The following must be considered:

1. Group support with trained clinicians to include expressive and experiential interventions,
2. Techniques which show respect for values and spirituality,
3. A platform for Black women to define themselves and their experiences with sickness and health,
4. Creating an arena that allows Black women to inform/influence their own treatment while communing with other Black women.

Superwoman and Mammy may not have been claimed, but neither were they categorically rejected—many of their individual traits surfaced in written expression of the artistic work. The persona of Superwoman is readily recognized in the African American community (Sylvester, 2011), however, she did not surface with the women in this study; not a single participant self-identified with the stereotype. Although many women acknowledged the need to re-enforce boundaries and engage more actively in self-care, what was not present was the expectation to be everything to everybody. However, neither was there evidence of attempts to discount other's perceptions of unyielding strength and unlimited resources. This suggests the

mask still serves a purpose: if the viewer is unsure of what they are seeing, they may tread more carefully. Perceptions of strength and expectations of caregiving were recurring themes, as was the need to promote community and reach out to other Black women.

Several women commented that the length of the workshop was too short; stating that an all-day, on-going platform for such work was desired. When this researcher responded that room reservation concerns (date, availability, length of use and cost) were an issue, several respondents offered to seek sites through churches and other community organizations—one woman even offered her home. This suggests that this population, however difficult to recruit, found some value in being able to work through concerns specific to them.

Although Landy believes that the “role is not necessarily fixed...but capable of change according to life circumstances of the individual role player” (Landy, 2005, p. 96), the psychological flexibility required to shift between roles, without feelings of guilt or blame, often requires clinical assistance. For Black women, and perhaps these participants expressed having an easier time with the transition due to their ages (most were over 40), the shifting is superficial. Removing the presumption of role, (the only area where role was evaluated was on the initial intake form), participants were invited to focus on themselves, not their responsibilities to others, although intimate relationships (spouses, children) were discussed by a few. After the groups, many endorsed wanting ongoing workshops to focus on the needs of African American women. Frequently noting with surprise the spontaneity of their responses, many participants acknowledged sharing more than they had intended, reporting feelings of “togetherness” and “support.” Themes of creativity, beauty, unexpected support and talent were also mentioned.





## Limitations

As I, the lead researcher am an African American woman and expressive arts therapist specializing in drama therapy, there is more than a bit of bias in the selection of the topic and the structure of the study.

The questionnaire used as part of the consent paperwork did not clarify or quantify the number of caregiving roles, as a child, spouse or elder needing care could *also* be a person with disabilities, complicating caregiving responsibilities and feelings of obligation. Multiple responsibilities compound feelings of being overwhelmed and undervalued and were not accounted for. In the final workshop, the researcher neglected to gather all masks together, in effect robbing this group of the final closing, unifying activity. Although all other activities were identical to prior groups, the final session may be viewed as an outlier due to the omission.

The five stages of a drama therapy session, as espoused by Renee Emunah (1994) were not conducted. The study was constructed to provide a concrete image (mask) as a “take away” for the time participants invested in the process. As a qualitatively based study, both drama therapy and arts based techniques were incorporated, resulting in a tactile as well as embodied experience, but in effect limiting the opportunity to delve too deeply in either.

Imagined as an arts based inquiry, art was an integral part of the data, but not the sole methodology. This study was a qualitative inquiry with artistic aspects which included the writer processing her own journey through textiles (the cloak) and art (mask creation). Group process began with drama therapy techniques to explore social role values, moved to a more traditional “talking” circle, then to art creation and dialoguing with images (McNiff, 1992). Encouraging

dialogues with another's mask was not facilitated, which could have enriched the data. In addition, the study did not embrace portraiture holistically, as the women participated in art and drama which was framed by the researcher (Lightfoot-Lawrence, 1997). Participants were not given an abstraction on which to create (a blank canvas or piece of paper, for example), but were offered a specific shape—a mask. The lead researcher, in effect, framing the content and context for the participants visually, rather than continuing the abstract exploration of self-definition as was done through embodiment.

Lafrance and Stoppard (2007) suggest applying a material-discursive approach in therapeutic interventions. This combines the material requirements of adult women (financial, employment, education) with discourse regarding how cultural and societal expectations color or affect these requirements and could further assist in the deconstruction of the “good woman” or as experienced in the African American community, the Superwoman persona. This would have provided a platform for women to re-story their experiences with stress and the ensuing depression which may follow. The study focused on the experiences of African American women and their perception of themselves. Although several made note of how other's perceptions affected their relationships with partners, children, or parents, they did not delve further into how the images affected their responses to stress and self-care.

As no women self-identified as lesbian in the questionnaire, lesbian women were not included in this study. The African American community has a turbulent history with same sex coupling. Considered an abomination by Christian and Muslim traditions (religions that have a historical base in the Black community and are rooted in patriarchy), same sex unions, whether male or female, usually result in individuals being ostracized, criticized, and victimized.

For these and perhaps a multitude of other factors not mentioned here, this portion of Black females did not respond to recruiting efforts. Whether this is due to lack of interest, lack of exposure, or the perception that they would not be welcomed—or reluctance to put their “business in the street”—is unknown. Future duplications of the study may do well to enlist support from LGBT organizations in order to gain access to this segment of the population. However, it remains unclear how active Black lesbians are in these activist organizations, as most spokespersons in the news are male and disproportionately White.

All participants identified as Christian or spiritual resulting in religious homogeneity. As recruitment efforts were largely word of mouth, individuals who observe Islamic, Judaic, Buddhist or other religious perspectives were not represented.

Thomas (2004) conducted a study with preliminary work rooted in discussions with Black, female psychologists. These interviews identified seven generalized concerns these professionals considered essential to the effective treatment of African American women: 1) attention to context, 2) culture, 3) ethnicity, 4) socioeconomic status, 5) identities—ethnic and gender, 6) uniqueness and 7) resiliency. To ignore issues specific to this population which influence the intensity, frequency and duration of any experienced symptoms discounts a substantial and persistent source of triggers and identifiable stressors for Black women. Michele Wallace revisited her work: “...whereas then I spoke of black women making history and being written about, I now think it is more important that black women “write” their own histories, since the power to write one’s own history is what making history appears to be all about” (Wallace, 1990b, p. xxi). I am not sure why she put write in quotation marks, as if to suggest the action is fraudulent? Is it about the creative process of writing or the scientific documentation of

accomplishments and struggles she is air quoting? Or commentary that history has been “written” by the conquerors, not the conquered? If the latter was Wallace’s point, then this is all the more reason for those who have been voiceless to speak.

“Courage may in fact be dangerous at times—when knowledge is new and fragile; when reaching out for a desired connection may lead to painful repudiation; when speaking without any real possibility of being heard may lead to betrayal and abandonment. But the ways girls and women, and women of different generations, negotiate these difficult issues together mark the fate of female courage in families...the recovery of ordinary courage in women’s lives is nothing short of extraordinary, because it depends upon finding a voice to speak what has been unspeakable” (Rogers, 1993, p. 281).

Although Rogers’ comment was not directly connected to the experiences of African American women, but a statement on how young girls learn to define womanhood from examples of those woman in their lives, the sentiment of the potential for betrayal, the fear of abandonment or ridicule for speaking transgressive truths is relevant here. The study was an attempt by the author to provide a place for Black women to safely identify, clarify and give voice to issues regarding their image. We are willing and capable of speaking for ourselves, but have been conditioned to choose the arena and delivery method carefully, if we elect to speak at all.

## **Conclusion**

When researching Black women, it is essential to address the distancing behaviors in most research procedures and allow for a closer look.

A shift from distant authoritative perspectives forces us to consider how we approach and interpret African American women's stories. It is not enough to just collect narrative data; rather, we must attempt to locate ourselves and perform research in ways that affirm African American women. The process of participant "witnessing" is more accurate than our roles as researchers, particularly when engaged in research with African American women...In participant witnessing, the distance between the ethnographer and informant fades as the researcher begins to listen in a way that encourages self-representation and accurate "other-representation" (Taylor, 1998, p. 59).

The above provides researchers a platform from which to process their experience during data collection, regardless of race, creed, culture, sexual identity or gender. Taking advantage of this allowed me as an artist researcher to explore the topic myself while facilitating the process for others. Being able to think through the Superwoman cape with my aunt provided a platform to commune with her through textile making. Here, the clarification of the item was the focus, rather than exploration of how the persona affected or influenced her relationships.

My mother's recruiting efforts required me to explain what I was doing and why I was doing it, resulting in conversations about colorism within our family, generational expectations of gender roles, and choices she felt forced to make regarding caregiving while raising me and my sisters. The religious and relational ramifications of her decisions to work outside the home or leave a marriage colored her responses to her children's choices of careers and partners. Considered by many to be creative and strong, both my mother and aunt acknowledged the necessity of perseverance and need of familial support. They were able to

identify traits and behaviors of each of the stereotypes explored here, but did not embrace or consider that they embodied any of them. Looking back on how I was raised by these and other women, I see efforts to steer me and my sisters away from them. Expectations of behavior made clear whether or not actual labels were used. Decisions and mandates not explained, but expected to be followed unconditionally. Not Mammy, but Mother, whether by birth or birthright of being an elder family member.

During the closing portion of the workshops, several women expressed a desire for the program to have been longer. Designed for a three hour room reservation, many stated feeling the workshop could have (or strongly suggested that it should have) been an all-day session.

I think to do something like this is not a day project. I think it's an all-day workshop at least, and

I think that would be helpful.

I think this should be an ongoing thing.

Where do we go from here?

The need for an opportunity to explore creatively with other Black women and work to identify, clarify and address concerns specific to them was made clear. Developing such activities with attention paid to benefits of intergenerational participation as well as inclusion of other religious beliefs and sexual identities could strengthen bonds, promote support and explore intolerance and acceptance within this population.

Several studies have documented efforts with attempts to develop on-going support systems specifically designed to address the needs of Black women, including Claiming

Your Connections (CYC) (L. V. Jones & Warner, 2011), the H.E.R.S. (history, empowerment, rapport and spirituality) model (Moore III & Madison-Colmore, 2005), and Sister Circles (Neal-Burnett et al., 2011), which all embrace connectedness and support through shared experience. The focus is also on the treatment of a disease or crisis, rather than a proactive approach to defining self-image and wellness. The current study differs from these in that embodiment was the key component of expression. Creative, physical experiential exploration of not simply role, but the expression of a value (beauty, intelligence, strength) provided an opportunity for women to step outside of what other's may expect and focus on meaning making for themselves. And, in doing so, discover strengths and support which may have been untapped or ignored.

Art serves dual purposes in African and African American cultures. The symbols used to adorn architecture and clothing communicate the importance of the thing. The art in this study informed the process through its meaning to the participants. The researcher's exploration of the topic and workshops through textiles and mask making was art-based research to clarify how I experience my self-image (McNiff, 2008). The masks of the participants were intended to assist them in exploring visually the issues which emerged experientially.

The use of arts in research is not intended for art's sake. It is explicitly tied to moral purposes of social responsibility and epistemological equity. Thus, the research text is intended to involve the reader/audience in an active process of meaning making that is likely to have transformative potential. Relying on the power of art to both inform and engage, the

research text is explicitly intended to evoke and provoke emotion, thought and action (Cole & Knowles, 2008, p. 62).

The women who volunteered their time for the pilot study used to develop the current one used the words and phrases "...prophetic, history, interesting...reflection...painful...made me feel good...realistic," and "rewarding," to describe the process of discussing how they process stress while acknowledging (and rejecting) the Superwoman persona (Sylvester, 2011). This, and the suggestion for an all-day experiential, supports the writer's belief that although recruitment for such activities may be hard fought, the opportunity to explore and express themselves for the sake of wellness not just the treatment of disease, is desired and welcomed by this population.



## APPENDIX: Adinkra Symbols



Ananse Ntontan: “Spider’s web,” symbol of wisdom, creativity and the complexities of life. I aspire to wisdom. My grandfather, a Baptist preacher who had dreamed of becoming a doctor in his youth, had an uncanny way of saying succinctly exactly what a person needed to hear. I aspire to that gift, but often feel I come up short.



Nkyinkyim: “Twisting,” symbol of initiative, dynamism and versatility. Not that I often feel versatile, but challenges have resulted in me feeling I must yield to certain things in order to pursue certain others.



Gye Nyame: “Except for God,” symbol of the supremacy of God. One of the things I treasure most about my work is the fact that I am forced to count my blessings daily. There but for the grace of God go I.



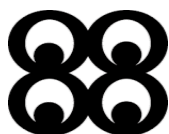
Hwe Mu Dua: “Measuring stick,” symbol of examination and quality control. I have been called a perfectionist, but view this as the responsibility not to dishonor the sacrifices of the people who helped me get to where I am by not doing my best. To whom much is given, much is expected.



Wawa Aba: seed of the wawa tree, symbol of hardiness, toughness and perseverance. Not necessarily strength, in my view, but a stubbornness to not let failures or hardship keep me from my goals.



Wo Nsa Da Mu A: “If your hands are in the dish...” symbol of participatory government, democracy and pluralism.



Mata Masie: “What I hear I keep,” symbol of knowledge, prudence. Of them all, this symbol probably best describes what I believe to be others’ perception of me. Trusted with secrets within and outside of my family, the burden of knowing what to say to whom is sometimes oppressive. Familial expectations and roles individuals play in families determine the expectations of performance—level of ability, amount of productivity.



Nea Annim no sua a, ohu: “He who does not know can know from learning,” symbol of knowledge, life-long education and continued quest for knowledge.



Nsaa: Hand woven fabric, symbol of excellence, genuineness, authenticity.



Seso Wo Suban: “Change of transform your character,” symbol of life transformation.



Tamfo bebre: “The enemy will stew in his own juice,” symbol of jealousy and envy.



Nyama nti: “By God’s grace,” symbol of faith and trust in God, often considered the staff of life in many cultures.



Nyame Dua: “Tree of God,” altar, symbol of God’s presence and protection. I pray and or meditate before I go to any treatment site.



Sankofa: “Return and get it,” symbol of learning from the past. Adlerian trained, family dynamics and how one learned to forge their way in the world informs my practice.



## References

- Alarcon, R. D., Foulks, E. F., & Vakkur, M. (1998). *Personality disorder and culture: Clinical and conceptual interactions*. New York: John Wiley & Sons.
- Beauboeuf-Lafontant, T. (2007). You have to show strength: An exploration of gender, race, and depression. *Gender & Society*, 21(1), 28-51.
- Beauboeuf-Lafontant, T. (2008). Listening past the lies that make us sick: A voice-centered analysis of strength and depression Among Black women. *Qualitative Sociology*, 31, 391-406. doi: 10.1007/s11133-008-9113-1
- Beauboeuf-Lafontant, T. (2009). *Behind the mask of the strong Black woman: Voice and embodiment of costly performance*. Philadelphia, PA: Temple University Press.
- Becker, C. (2006). Amazigh textiles and dress of Morocco: Metaphors of Motherhood. *African Arts*, 39(3), 42-96.
- Black, A. R., Murry, V. M., Cutrona, C. E., & Chen, Y.-f. (2009). Multiple roles, multiple lives: The protective effects of role responsibilities on health functioning of African American mothers. *Women's Health*, 49(2-3), 144-163. doi: 10.1080/03630240902915051
- Borum, V. (2012). African American Women's perceptions of depression and suicide risk and protection: A womanist exploration. *Journal of Women in Social Work*, 27(3), 316-327. doi: 10.1177/0886109912452401
- Brittan, A. (1999). Masculinity and power. In C. C. Gould (Ed.), *Gender: Key concepts in critical theory*. (pp. 113-119). Highlands, New Jersey: Humanity Books.

- Brome, D. R., Owens, M. D., Allen, K., & Vevalina, T. (2000). An examination of spirituality among African American women in recovery from substance abuse. *Journal of Black Psychology, 26*, 470-486. doi: 10.11177/0095798400026004008
- Brown, A. C., Brody, G. H., & Stoneman, Z. (2000). Rural Black women and depression: A contextual analysis. *Journal of Marriage and Family, 62*(1), 187-198.
- Brown, C., Conner, K., Copeland, V. C., Grote, N., Beach, S., Battista, D., & Reynolds, I., Charles F. (2010). Depression stigma, race and treatment seeking behavior and attitudes. *Journal of Community Psychology, 38*(3), 350-368. doi: 10.1002/jcop.20368
- Cannon, K. G. (1995). *Katie's canon: Womanism and the soul of the Black community*. New York, NY: Continuum.
- Chaney, C. (2011). The character of womanhood: How African American women's perceptions of womanhood influence marriage and motherhood. *Ethnicities, 11*(4), 512-535. doi: 10.1177/1468796811415764
- Colbert, L., Jefferson, J., Gallo, R., & Davis, R. (2009). A study of religiosity and psychological well-being in African Americans: Implications for counseling and psychotherapeutic process. *Journal of Religion & Health, 48*(3), 278-289. doi: 10.1007/s10943-008-9195-9
- Cole, A. L., & Knowles, J. G. (2008). Arts-Informed Research. In A. L. Cole & J. G. Knowles (Eds.), *Handbook of the arts in qualitative research: Perspectives, methodologies, examples and issues*. (pp. 55-70). Los Angeles, CA: Sage Publications.
- Collins, P. H. (2000). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. (2nd ed.). New York, NY: Routledge.

- Copeland, E. J. (1977). Counseling Black women with negative self-concepts. *Personnel and Guidance Journal*, 397-400.
- Diagnostic and statistical manual of mental disorders: DSM-5*. (2013). (5 ed.). Arlington, VA: American Psychiatric Association.
- Donovan, R. A., Galban, D. J., Grace, R. K., Bennett, J. K., & Felicie, S. Z. (2013). Impact of racial macro- and microaggressions in Black Women's lives: A preliminary analysis. *Journal of Black Psychology*, 39(2), 185-196. doi: 10.1177/0095798412443259
- DuBois, W. E. B. (1969). *The souls of Black folk*. New York: Signet Classic.
- Dunbar, P. L. (1997). We Wear the Mask. In P. Negri (Ed.), *Selected poems: Paul Lawrence Dunbar*. New York: Dover Publications, Inc.
- Emunah, R. (1994). *Acting for real: Drama therapy process, technique, and performance*. New York: Brunner-Routledge.
- Estrella, K. (2005). Expressive therapy: An integrated arts approach. In C. A. Malchiodi (Ed.), *Expressive therapies* (pp. 183-209.). New York: The Guilford Press.
- Fabrega, H. (1990). The concept of somatization as a cultural and historical product of Western medicine. *Psychosomatic Medicine*, 52, 653-672.
- Fine, M. (2012). Troubling calls for evidence: A critical race, class and gender analysis of whose evidence counts. *Feminism & Psychology*, 22(3), 3-19. doi: 10.1177/0959353511435475
- Gainor, K. A. (1992). Internalized oppression as a barrier to effective group work with Black women. *The Journal for Specialists in Group Work*, 17(4), 235-242.

- Gibbs, J. T., & Fuery, D. (1994). Mental health and well-being of Black women: Toward strategies of empowerment. *American Journal of Community Psychology*, 22(4), 559-582.
- Gibson, L. a. H., Constance Smith. (2006). Integrative review of spirituality in African American breast cancer survivors. *The ABNF Journal*, 17(2), 67-72.
- Giddings, P. J. (1984). *When and where I enter: The impact of Black Women on race and sex in America*. New York, NY: HarperCollins.
- Giovanni, N. (1997). Hands: For mothers day. In *Philadelphia*. New York: Collectables.
- Greene, B. (2008). African American women, religion, and oppression: The use and abuse of spiritual beliefs. In C. A. Rayburn, Comas-Diaz, Lillian. (Ed.), *WomanSoul: The Inner life of women's spirituality*. Westport, Connecticut: Praeger.
- Guarnaccia, P. J., Canino, G., Rubio-Stipec, M., & Bravo, M. (1993). The prevalence of ataque de nervios in the Puerto Rico Disaster Study: The role of culture in psychiatric epidemiology. *Journal of Nervous and Mental Diseases*, 181, 159-167.
- Harvey, R. D., LaBeach, N., Pridgen, E., & Gocial, T. M. (2005). The intragroup stigmatization of skin tone among Black Americans. *Journal of Black Psychology*, 31(3). doi: 10.1177/0095798405278192
- Hatch, J. V. (1991). Introduction: Two hundred years of Black and White drama. In L. Hamilton & J. V. Hatch (Eds.), *The roots of African American drama: An anthology of early plays, 1858-1938*. (pp. 15-37). Detroit, MI: Wayne State University Press.
- . Health, United States 2002-2006, Table 29. *National Center for Health Statistics*. Hyattsville, MD: Centers for Disease Control and Prevention



- Huggins, N. I. (1971). Art: The Black Identity. *Harlem Renaissance* (pp. 137-189). New York: Oxford University Press.
- Hull, G. T., & Smith, B. (1982). The politics of Black Women's studies. In G. T. Hull, P. B. Scott & B. Smith (Eds.), *All the women are White, all the Blacks are men, but some of us are brave: Black Women's studies*. (pp. xvii-xxxii). New York: The Feminist Press at the University of New York.
- Jack, D. C. (1999). Silencing the self: Inner dialogues and outer realities. In T. Joiner & J. Coyne (Eds.), *The interactional nature of depression* (pp. 221-246). Washington, DC: American Psychological Association.
- Jewell, K. S. (1993). *From Mammy to miss America and beyond: Cultural images and the shaping of U.S. social policy*. New York: Routledge.
- Jones, C., & Shorter-Gooden, K. (2003). *Shifting: The double lives of Black women in America*. New York, NY: Harper Collins.
- Jones, L. V., & Warner, L. A. (2011). Evaluating culturally responsive group work with Black Women. *Research on Social Work Practice*, 21(6), 737-741. doi: 10.1177/1049731511411488
- Jordan-Zachery, J. S. (2009). Mythical illusions: Cultural images and Black womanhood. *Black women, cultural images and social policy*. (pp. 26-48). New York: Routledge.
- Kelch-Oliver, K., & Ancis, J. R. (2011). Black Women's body image: An analysis of culture-specific influences. *Women & Therapy*, 34(4), 345-358. doi: 10.1080/02703149.2011.592065
- Kosova, W. (2007, April 23). The power that was. *Newsweek*, 24-31.

- Kovel, J. (1971). *White racism: A psychohistory*. New York: Random House.
- Ladson-Billings, G. (2009). "Who you callin' nappy headed?" A critical race theory look at the construction of Black women. *Race Ethnicity and Education*, 12(1), 87-99. doi: 10.1080/13613320802651012
- Lafrance, M. N., & Stoppard, J. M. (2006). Constructing a non-depressed self: Women's accounts of recovery from depression. *Feminism & Psychology*, 16(3), 307-325. doi: 10.1177/0959353506067849
- Lafrance, M. N., & Stoppard, J. M. (2007). Re-Storying women's depression: A material-discursive approach. In C. Brown & T. Augusta-Scott (Eds.), *Narrative therapy: Making meaning, making lives*. (pp. 23-38). London: Sage Publications.
- Landy, R. (2005). Drama therapy and psychodrama. In C. A. Malchiodi (Ed.), *Expressive Therapies* (pp. 90-116). New York: The Guilford Press.
- Lerner, G. (1972). Preface. In G. Lerner (Ed.), *Black women in White America: A documentary history* (pp. xviii-xxv).
- Lorde, A. (1984). *Sister outsider: Essays and speeches*. Trumansburg, NY: Crossing Press.
- Mattis, J. S. (2000). African American women's definition of spirituality and religiosity. *Journal of Black Psychology*, 26(1), 101-122.
- Mattis, J. S. (2002). Religion and spirituality in the meaning-making and coping experiences of African American women: A qualitative analysis. *Psychology of Women Quarterly*, 26(4), 309-321.
- Mayo, K. (2009, August). Black Women behaving badly. *ESSENCE*, 40, 104-150.

- McEwen, B. S. (2004). Protection and damage from acute and chronic stress: Allostasis and allostatic overload and relevance to the pathophysiology of psychiatric disorders. *Annals New York Academy of Sciences*, 1032, 1-7. doi: 10.1196/annals.1314.001
- McKenzie-Mohr, S., & LaFrance, M. N. (2011). Telling stories without the words: 'Tightrope talk' in women's accounts of coming to live well after rape or depression. *Feminism & Psychology*, 21(49), 49-73. doi: 10.1177/0959353510371367
- McNiff, S. (1992). *Art as medicine: Creating a therapy of the imagination*. Boston, MA: Shambala.
- McNiff, S. (2008). Art-Based Research. In J. G. Knowles & A. L. Cole (Eds.), *Handbook of the arts in qualitative research: Perspectives, methodologies, examples and issues* (pp. 29-40). Thousand Oaks, CA: Sage Publications, Inc.
- Moore III, J. L., & Madison-Colmore, O. (2005). Using the H.E.R.S. model in counseling African American women. *Journal of African American Studies*, 9(2), 39-50.
- Moreno, J. L. (1972). *Psychodrama* (4th ed. Vol. 1). McLean, VA: American Society for Group Psychotherapy & Psychodrama.
- Moreno, J. L. (1973). *Theatre of spontaneity* (2nd ed.). Beacon, New York: Beacon House.
- Morgan. (1999). *When chickenheads come home to roost: A hip-hop feminist breaks it down*. New York, NY: Touchstone, Simon & Schuster.
- Morgan, P. D., Gaston-Johansson, F., & Mock, V. (2006). Spiritual well-being, religious coping, and the quality of life in African American breast cancer treatment: A pilot study. *ABNF Journal*, 17(2), 73-77.

- Myers, H. F., Lesser, I., Rodriguez, N., Mira, C. C., Hwang, W. C., & Camp, C. (2002). Ethnic differences in clinical presentation of depression in adult women. *Cultural Diversity and Ethnic Minority Psychology*, 8(2), 138-156. doi: 10.1037/1099-9809.8.2.138
- Neal-Burnett, A., Stadulis, R., Murray, M., Payne, M. R., Thomas, A., & Salley, B. B. (2011). Sister circles as a culturally relevant intervention for anxious Black women. *Clinical Psychology: Science and Practice*, 18(3), 266-273.
- Nicolaidis, C., Timmons, V., Thomas, M. J., Waters, A. S., Wahab, S., Mejia, A., & Mitchell, S. R. (2010). "You don't go tell White people nothing": African American Women's perspectives on the influence of violence and race on depression and depression care. *American Journal of Public Health*, 100(8), 1470-1476. doi: 10.2105/AJPH.2009.161950
- Omi, M., & Winant, H. (1994). *Racial formation in the United States: From the 1960s to the 1980s*. (2nd ed.). New York: Routledge.
- Perez, M., & Joiner, T. E. (2003). Body image dissatisfaction and disordered eating in Black and White women. *International Journal of Eating Disorders*, 33, 342-350. doi: 10.1002/eat.10148
- Pheterson, G. (1986). Alliances between women: Overcoming internalized oppression and internalized domination. *Signs*, 12(1), 146-160.
- Power, C. A., Cole, E. R., & Fredrickson, B. L. (2011). Poor women and the expression of shame and anger: The practice of breaking social class feeling rules. *Feminism & Psychology*, 21(2), 179-197. doi: 10.1177/0959353510384125

- Propst, L. R. (1980). The comparative efficacy of religious and non-religious imagery for the treatment of mild depression in religious individuals. *Cognitive Therapy and Research*, 4, 167-178.
- , & Riggs, M. (Director). (1986). *Ethnic notions*. [Newsreel]. San Francisco, California.
- Rogers, A. G. (1993). Voice, play, and a practice of ordinary courage in girls' and womens' lives. *Harvard Educational Review*, 63(3), 265-295.
- Schulman, G. I. (1974). Race, sex and violence? A laboratory test of the exual threat of the Black male hypothesis. *American Journal of Sociology*, 79, 1260-1277.
- Scott, K. Y. (1991). *The habit of surviving: Black women's strategies for life*. New Jersey: Rutgers University Press.
- Settles, I. H., Pratt-Hyatt, J., & Buchanan, N. T. (2008). Through the lens of race: Black and White Women's perceptions of womanhood. *Psychology of Women*, 32, 454-468.
- Sternberg, P., & Garcia, A. (1989). Sociodrama in psychotherapy. In P. Sternberg & A. Garcia (Eds.), *Sociodrama: Who's in your shoes?* (pp. 155-164). Westport, CT: Praeger.
- Stringer, E. C. (2009). Keeping the faith: How incarcerated African American Mothers use religion and spirituality to cope with imprisonment. *Journal of African American Studies*, 13(3), 325-347. doi: 10.1007/s12111-009-9096-3
- Sykes, W. (2009). *I'ma Be Me*: Home Box Office Television.
- Sylvester, L. (2011). *Unmasking Superwoman: African American women, depression and spirituality*. Expressive Therapies Department. Lesley University. Cambridge, MA.
- Taylor, J. Y. (1998). Womanism: A methodologic framework for African American women. *Advances in Nursing Science*, 21(1), 53-64.

- Thach, E., & Thompson, K. J. (2006). Trading places: Examining leadership competencies between for-profit vs. public and non-profit leaders. *Leadership and Organization Development Journal*, 28(4), 356-375. doi: 10.1108/01437730710752229
- Thomas, V. G. (2004). The psychology of Black women: Studying women's lives in context. *Journal of Black Psychology*, 30(3), 286-306. doi: 10.1177/0095798404266044
- Thompson, C. (2000). African American women and moral masochism: When there is too much of a good thing. In L. C. Jackson & B. Greene (Eds.), *Psychotherapy with African American women: Innovations in psychodynamic perspectives and practice*. (pp. 239-250). New York: Guilford Press.
- Turner, D. (1971). *Black drama in America: An anthology*. Greenwich, Connecticut: Fawcett.
- Unknown. (1976, February 15). 'Welfare Queen' becomes issue in Reagan campaign: Hitting a nerve now 4 alias items in notebook., *New York Times*, p. 51.
- VanSertima, I. (1976). *They came before Columbus: The African presence in ancient America*. New York: Random House.
- Wade, T. J. (1996). The relationships between skin color and self-perceived global, physical, and sexual attractiveness, and self-esteem for African Americans. *Journal of Black Psychology*, 22, 358-373. doi: 10.1177/00957984960223006
- Walker, A. (1983). *In search of our mothers' gardens: Womanist prose*. New York, NY: Harcourt, Brace-Jovanovich.
- Wallace, M. (1982). A Black feminist's search for sisterhood. In G. T. Hull, P. B. Scott & B. Smith (Eds.), *All the women are White, all the Blacks are men, but some of us are brave:*

- Black Women's Studies*. (pp. 5-12). NY: The Feminist Press of the University of New York.
- Wallace, M. (1990a). *Black macho and the myth of superwoman*. New York: Verso.
- Wallace, M. (1990b). How I saw it then, how I see it now. *Black macho and the myth of superwoman*. (pp. xviii-xxxviii). New York: Verso.
- Wilder, J. (2010). Revisiting "Color Names and Color Notions": A contemporary examination of the language and attitudes of skin color among young Black women. *Journal of Black Studies*, 41(1), 184-206. doi: 10.1177/0021934709337986
- Wilkins, A. C. (2012). Becoming Black Women: Intimate stories and intersectional identities. *Social Psychology Quarterly*, 75(2), 173- 196. doi: 10.1177/0190272512440106
- Williams, T. (2009). *Black pain: It just looks like we're not hurting*. New York: Scribner, Simon & Schuster, Inc.
- Winkle-Wagner, R. (2008). Not feminist but strong: Black women's reflections of race and gender in college. *The Negro Educational Review*, 59(3-4), 181-195.
- Wu, C. Y., Prosser, R. A., & Taylor, J. Y. (2010). Association of depressive symptoms and social support on blood pressure among urban African American women and girls. *Journal of the American Academy of Nurse Practitioners*, 22, 694-704.
- Wyatt, J. (2008). Patricia Hill Collins's *Black Sexual Politics* and the genealogy of the Strong Black Woman. *Studies in Gender and Sexuality*, 9, 52-67. doi: 10.1080/15204650701759516